Paginiant Committee			RECEIVED	RY	COVER PAGE
Recipient Committee Campaign Statement	ink.	OS ANGERES	COUN CALIFO	PRNIA 460	
Cover Page	,		And the second s	FOR	400
(Government Code Sections 84200-84216.5)		W15	2012 OCT 29 A	M O:	
,,	Statement covers period	Date of election if applicable:		·	of 21
	from10/01/2012	(Month, Day, Year)	10 (25/12		
		1.1.	CAMPAIGN FI	MARUL	Official Use Only
SEE INSTRUCTIONS ON REVERSE	through10/20/2012	1110112	DISCLOSURE 8	ECTION 6	104 10
1. Type of Recipient Committee: All Committees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:			
Officeholder, Candidate Controlled Committee	rimarily Formed Ballot Measure	Preelection Statement	Г	Quarterly Stateme	ent
	ommittee	Semi-annual Statemen	t 🗀		
<u> </u>	Controlled Sponsored	Termination Statement			
	Also Complete Part 6)	(Also file a Form 410 T	•	Statement - Attac	h Form 495.
General Purpose Committee Sponsored F	rimarily Formed Candidate/	Amendment (Explain)	<del>Delow)</del>		
O Small Contributor Committee	Officeholder Committee				
O Political Party/Central Committee	Nao Complete Part 7)				
	), NUMBER		<del></del>	<u>'-</u> -	
3. Committee information	1348068	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Yes on Measure J - Committee for Jobs and Tr	0 1:1:	NAME OF TREASURER	<del></del>		
	affic Relief O Coalition	Charles M. Shumaker			<del>,</del>
ox charitable, Business and Labor (	Organizations	MAILING ADDRESS		•	
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
CITY STATE ZIP CO	DDE AREA CODE/PHONE	NAME OF ASSISTANT TREASL	IRER, IF ANY		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E	OX.	MAILING ADDRESS			
	~	MALINO ABBILLOS			
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
·					
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAJL ADD	RESS		
4. Verification					
I have used all reasonable diligence in preparing and reviewing	this statement and to the best of my kno	wledge the information contained he	erein and in the attached	schedules is true an	d complete. I certify
under penalty of perjury under the laws of the State of Californi	a that the loregoing is true and confect.				
Executed on 10 8113	Ву	Signature of Treesurer or Assistan	(Face)		
Dete	•	Signature of Treasurer of Assistan	k 1 reasurer		The
Executed on	By Signature of Con	trolling Officeholder, Candidate, State Measure Pr	roponent or Responsible Officer o	Sponsor	AD
Executed on	Ву				The P
Date	~, <u></u>	Signature of Controlling Officeholder, Cendidate,	State Measure Proponent		
Executed on	Ву	Signature of Controlling Officeholder, Candidate,	State Mese re Dominion		
Lang		afficient on contain floritainna, caudians	•		S Form 460 (January/05) SK-FPPC (866/275-3772)
			FFF-5 (0)	Li ian tidihitini dadiw	State of California

Page 2 of 21

	Officeholder or Candidate Controlled Comm	ittee	6.	Primarily Formed Ball	ot Measure	Committee		
	NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE Measure J - Accelerating Job	Relief, Job Cr	eation		· · · · · · · · · · · · · · · · · · ·
	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRI	CT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI L.A. Co. Transpor			] SUPPORT ] OPPOSE
	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) (	STATE ZIP		Identify the controlling of	ficeholder, ca	ndidate, or state	measure	proponent, if any
				NAME OF OFFICEHOLDER, CA	NDIDATE, OR PI	ROPONENT	-	
	Related Committees Not Included in this Stanot included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	or are primarily formed to receive		OFFICE SOUGHT OR HELD		DIST	TRICT NO.	IF ANY
•	COMMITTEE NAME	I.D. NUMBER						
	NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Car				
•	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	OX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
	CITY STATE 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?  YES NO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
,	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	OX)					_	
	CITY STATE ZIP (							

### Campaign Disclosure Statement Summary Page

Type or print in lnk.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations 1348068 Column A Column B Calendar Year Summary for Candidates **Contributions Received** TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) CALENDAR YEAR Running in Both the State Primary and TOTAL TO DATE **General Elections** \$ 2,123,050.00 1/1 through 6/30 7/1 to Date 2. Loans Received ...... Schedule B, Line 3 0.00 0.00 20. Contributions \$ 2,123,050.00 Received 4,288.46 0.00 4. Nonmonetary Contributions ...... Schedule C, Line 3 21. Expenditures Made 2,127,338.46 **Expenditures Made Expenditure Limit Summary for State Candidates** 1,012,671.00 7. Loans Made ...... Schedule H, Line 3 0.00 22. Cumulative Expenditures Made\* 8. SUBTOTAL CASH PAYMENTS ...... Add Lines 6 + 7 \$ 967,671.00 \$ 1,012,671.00 (If Subject to Voluntary Expenditure Limit) -7,637.50 46,088.76 Date of Election Total to Date (mm/dd/yy) 0.00 4,288.46 \$ \_\_\_1,063,048.22 **Current Cash Statement** 12. Beginning Cash Balance ...... Previous Summary Page, Line 16 \$ \_ 126,000.00 To calculate Column B. add 1,952,050.00 amounts in Column A to the 13. Cash Receipts ...... Column A, Line 3 above corresponding amounts \*Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 0.00 from Column B of your last reported in Column B. report. Some amounts in 967,671.00 15. Cash Payments ...... Column A. Line 8 above Column A may be negative 1,110,379.00 figures that should be 16. ENDING CASH BALANCE .......... Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 0.00 17. LOAN GUARANTEES RECEIVED ...... Schedule B. Part 2 \$ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts 0.00 FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

### Schedule A

Type or print in ink.

SCH		

Monetary	Ionetary Contributions Received  Amounts may be rounded to whole dollars.  Statement covers from 10/01/2012		·	CALIFO FOR	RNIA	460		
SEE INSTRUCTIO	INS ON REVERSE			through	2012	Page	o	f
NAME OF FILER Yes on Meas	ure J - Committee for Jobs and Traffic Relief, a	Coalition of	Charitable, Business and	Labor Organizatio	ons	I.D. NUMB 1348068		
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 CALENDAR YE (JAN. 1 - DEC.	EAR	TO	ECTION DATE QUIRED)
10/04/2012	Anschutz Entertainment Group, Inc.	□IND □COM 図OTH □PTY □SCC		100,000.00	200,0	00.00		
10/19/2012	Anschutz Entertainment Group, Inc.	□IND □COM ☑OTH □PTY □SCC		100,000.00	200,0	00.00		
10/01/2012	Cement Masons Local No. 600	□IND □COM ☑OTH □PTY □SCC		5,000.00	5,0	00.00		
10/19/2012	City National Corporation	□IND □COM ⊠OTH □PTY □SCC		10,000.00	10,0	00.00		
10/17/2012	Cubic Transportation Systems, Inc.	□IND □COM ⊠OTH □PTY □SCC		25,000.00	. 25,0	00.00		
			SUBTOTAL\$	240,000.00	i da sa kata da	disarah pangsari Salada Kibu NA		
1. Amount re (Include al 2. Amount re 3. Total mone	A Summary  ceived this period – itemized monetary contributions.  I Schedule A subtotals.)  ceived this period – unitemized monetary contributions  etary contributions received this period.	s of less than \$	\$		IND – COM- OTH - PTY –	ributor Code Individual – Recipient ( (other than – Other (e.g - Political Pa - Small Cont	Committe n PTY on n., busine	r SCC) ess entity)

## Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A	(CONT.)
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Statement covers period

Monetary Contributions Received		letary Contributions Received  Amounts may be rounded to whole dollars.					ORM 460	
				through <u>10/20/2</u>	012	Page_	5 of <u>21</u>	
NAME OF FILER						I.D. NUI	MBER	
Yes on Meas	ure J - Committee for Jobs and Traffic Relief, a	Coalition of	Charitable, Business and	Labor Organizatio	ns	1348	068	
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 CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/15/2012	David Evans and Associates, Inc.	□IND □COM ☑OTH □PTY □SCC		5,000.00	5,00	0000		
10/15/2012	District Council of Plasters & Cement Masons of So. California	□IND □COM ☑OTH □PTY □SCC		10,000.00	10,00	00.00		
10/04/2012	Bli Broad	□IND □COM 図OTH □PTY □SCC		150,000.00	250,00	00.00		
10/17/2012	Eli Broad	□IND □COM 図OTH □PTY □SCC		100,000.00	250,00	00.00		
10/11/2012	Thomas Gaul	⊠IND □COM □OTH □PTY □SCC	Transportation Engineer Fehr & Peers	1,000.00	1,00	00.00	,	
			SUBTOTAL	\$ 266,000.00				

\*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

SCHEDULE A (CONT.)

CALIFORNIA A CO

Statement covers period

		from 10/01/2012		FORM 460			
				through _10/20/2	012	Page 6	of
Yes on Meas	ure J - Committee for Jobs and Traffic Relief, a	Coalition of	Charitable, Business and I	Labor Organization	ns	I.D. NUMBER 1348068	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE IF REQUIRED)
10/17/2012	HDR Engineering, Inc.	□IND □COM ☑OTH □PTY □SCC		25,000.00	25,00	000	
10/16/2012	HNTB Corporation	□IND □COM ☑OTH □PTY □SCC		25,000.00	25,00	0.00	
10/12/2012	International Union of Operating Engineers Local No. 1: (#743030)	□IND □COM □OTH □PTY □SCC		25,000.00	54,28	8.46	
10/03/2012	Ironworker Management Progressive Action Cooperative	□IND □COM ☑OTH □PTY □SCC		100,000.00	100,00	0.00	
10/19/2012	Kiewit Corporation	□IND □COM ဩOTH □PTY □SCC		100,000.00	100,00	0.00	. <u>.</u>
			SUBTOTAL	275,000.00			

\*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)

Type or print in ink.

SCHEDULE A (CONT.)

Monetary Contributions Received	Amounts may be rounded to whole dollars.	from 10/01/2012	CALIFORNIA 460
		through _10/20/2012	Page7 of21
NAME OF FILER			I.D. NUMBER
Yes on Measure J - Committee for Jobs and Traffic Reli	ief, a Coalition of Charitable, Business and	Labor Organizations	1348068

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)
10/15/2012	Laborers's International Union of North America Local : Issues Committee (#1321812)	□IND □COM □CTH □PTY □SCC		50,000.00	50,000.00	
10/19/2012	Los Angeles County Museum of Art (LACMA)	□IND □COM ☑OTH □PTY □SCC		500,000.00	500,000.00	
10/19/2012	Los Angeles Dodgers, LLC	□IND □COM 図OTH □PTY □SCC		250,000.00	250,000.00	
10/16/2012	McDermott Consulting, Inc.	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000.00	
10/11/2012	Members' Voice of the State Building and Contruction T Council of CA (#980162)	adIND  IX COM  OTH  PTY  SCC		25,000.00	25,000.00	
		_	SUBTOTAL	826,000.00		

\*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)

Type or print in ink.

SCHEDULE A (CONT.
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Monetary Contributions Received	Amounts may be rounded to whole dollars.	Statement cov	ers period	CALIF	ORNIA	46	n
from10/01/2012						40	y
		through10/20/2	012	Page	8 <b>o</b>	f21	-
NAME OF FILER				I.D. NUM	BER	_	$\neg$
Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations 1348068							
FULL MAME CENTER APPRECE AND TIP CORE OF CONTRIBUTO	IF AN INDIVIDUAL ENTER	AMOUNT	CUMULATIVE TO	DATE	PERE	LECTION	

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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)
10/19/2012	NBC Universal	□IND □COM ☑OTH □PTY □SCC		100,000.00	100,000.00	
10/02/2012	Occidental Petroleum Corporation	□IND □COM □OTH □PTY □SCC		100,000.00	100,000.00	
10/15/2012	Parsons Brinckerhoff, Inc.	□IND □COM ☑OTH □PTY □SCC		25,000.00	25,000.00	
10/12/2012	Psomas	□IND □COM ☑OTH □PTY □SCC		3,000.00	3,000.00	
10/19/2012	Skanska USA Civil West California District, Inc.	□IND □COM ☑OTH □PTY □SCC		15,000.00	15,000.00	

SUBTOTAL\$

243,000.00

\*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

SCHEDU	JLEA (	CONT.)

Monetary	onetary Contributions Received  Amounts may be rounded to whole dollars.		Statement cover	•	FORM 460		
				through <u>10/20/2</u>	012	Page_	9 of <u>21</u>
NAME OF FILER	ure J - Committee for Jobs and Traffic Relief, a	Carlition of	Charitable Puginess and	Labor Organization	n.e.	I.D. NU	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	D DATE EAR	PER ELECTION TO DATE (IF REQUIRED)
10/11/2012	Stifel Nicolaus	□IND □COM ☑OTH □PTY □SCC		2,000.00	2,0	00.00	
10/17/2012	Unite Here	□IND □COM ☑OTH □PTY □SCC		100,000.00	100,0	00.00	
		□IND □COM □OTH □PTY □SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
			SUBTOTAL	\$ 102,000,00		maylini materii.	

\*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 E Payments Made

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

	SCHEDULEE				
Statement covers period	CALIFORNIA 160				
from10/01/2012	FORM TOO				
through	Page10 of21				
	I.D. NUMBER				
tions	1348068				

SEE INSTRUCTIONS ON REVERSE	through	Page	of				
NAME OF FILER  Yes on Measure J - Committee for Jobs and Traffic Relief, a Coa	lition of Charitah	le Business	and Labor Organ	izations	I.D. N	IUMBER	
les di Measure d' - Committee foi dobs and frairie Reffer, a Coa		re, Busines	and babor organ				
CODES: If one of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment, years of the following codes accurately describes the payment of the following codes				RAD radio airtime an RFD returned contrit SAL campaign work	RAD radio airtime and production costs RFD returned contributions		
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	PHO phone banks  POL polling and survey research  POS postage, delivery and messenger services  PRO professional services (legal, accounting)  TRC candidate  TRS staff/spor  TSF transfer by transfer by transfer by transfer by transfer by the professional services (legal, accounting)			TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registration	avel, lodging, and meals een committees of the same candidate/sponso		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR .	DESCRIPTION OF PAYMENT		AMOUNT PAID	
Budget Watchdogs Newsletter (#1345115)			Slate Mailer			11,461.00	
Budget Watchdogs Newsletter (#1345115)			Slate Mailer			11,461.00	
California Latino Voter Guide (#1322246)			Slate Mailer			11,000.00	
* Payments that are contributions or independent expenditures m	ust also be summa	arized on Se	chedule D.		SUBTOTA	L\$ 33,922.00	
Schedule E Summary							
1. Itemized payments made this period. (Include all Schedule B	E subtotals.)				\$	967,671.00	
2. Unitemized payments made this period of under \$100					\$.	0.00	
3. Total interest paid this period on loans. (Enter amount from S	Schedule B, Part 1	I, Column (	e).)		\$	0.00	
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)							

#### Schedule E (Continuation Sheet) **Payments Made**

#### Type or print in ink. Amounts may be rounded

	001120022 2 (00111.)
Statement covers period	CALIFORNIA 160
from 10/01/2012	FORM 400
through10/20/2012	Page11 of21
	I.D. NUMBER
Labor Organizations	1348068

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphemalia/misc. CNS campaign consultants contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings		office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting)		RFD	candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same c voter registration		·	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)			CODE	OR	DESCRIPTION	ON OF PAYMENT		AMOUNT PAID
Californians Vote Green (#1323171)				Slate Mailer				
				,				10,000.00
Community Partners FBO Move LA						, , , , , , , , , , , , , , , , , , ,		
			CNS					20,000.00
Community Partners FBO Move LA								
			CNS					10,000.00
COPS Voter Guide (#599014)								
				Slate Mailer				5,000.00
Educate Your Vote (#1345655)				-				
EUNCACE TOUR VOICE (#1342022)				Slate Mailer				6,000.00
* Payments that are contributions or Independent expenditures must als	so be su	ımmarized on	Schedule D				SUBTOTAL \$	51,000.00

# Schedule E

### Type or print in ink.

	<u> </u>	OCHEDOLL L (OCH).
	Statement covers period	CALIFORNIA 460
	from10/01/2012	FORM TOU
	through10/20/2012	Page 12 of 21
	-	I.D. NUMBER
L	abor Organizations	1348068

Payments Made	to whole dollars.	from 10/01/2012	FORM 46U
SEE INSTRUCTIONS ON REVERSE		through10/20/2012	- Page12 of21
NAME OF FILER			I.D. NUMBER
Yes on Measure J - Committee for Jobs and Traffic R	elief, a Coalition of Charitable, Business and	Labor Organizations	1348068
CODES. If one of the following and a province the days	without the maximum to your many enter the code. Other	nuice describe the neuron	m#

res on Measure 0 - Committee for Jobs and frailic Reffer	i, a coafficion	OL CHAILCA	Die, Business	and habor	OI Gailt Lact Oils	1348068
CODES: If one of the following codes accurately describes  CMP campaign paraphemalia/misc.  CNS campaign consultants  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	MBR member of meetings OFC office expetition ciphone ba POL polling ar POS postage,	ommunications and appearance penses rculating nks d survey reseat delivery and me	es	RAD RFD SAL TEL TRC TRS	radio airtime and production of returned contributions campaign workers' salaries t.v. or cable airtime and producandidate travel, lodging, and staff/spouse travel, lodging, a transfer between committees voter registration	uction costs meals and meals of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	,	CODE	OR	DESCRIPTIO	N OF PAYMENT	AMOUNT PAID
Election Digest G2012 (#1345303)			Slate Mailer	c		13,539.00
Election Digest G2012 (#1345303)			Slate Mailer	r		13,539.00
Fairbank, Maslin, Maullin, Metz & Associates		POL				20,370.00
Cathy Finley		FND		. ,		12,500.00
Cathy Finley	•	FND				12,500.00

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

**SUBTOTAL \$** 

72,448.00

### Schedule E (Continuation Sheet)

#### Type or print in ink. Amounts may be rounded

Statement covers period	CALIFORNIA 160					
from 10/01/2012	FORM +OO					
through10/20/2012	Page13 of21					
	I.D. NUMBER					
Labor Organizations	1348068					

Payments Made	to whole dollars.	from10/01/2012	FORM	400
SEE INSTRUCTIONS ON REVERSE		through10/20/2012	Page13_	of
NAME OF FILER			I.D. NUMBER	
Yes on Measure J - Committee for Jobs and Traffic Relief,	a Coalition of Charitable, Business and I	Labor Organizations	1348068	
CODES: If one of the following codes accurately describes th	e navment you may enter the code. Othe	nvise describe the navment		

CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)*  MTG meetir OFC office petition phone PHO phone POL polling postage	per communications ngs and appearances expenses on circulating e banks g and survey researcy ge, delivery and mes ssional services (legal	describe the payment. radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the sam voter registration information technology costs (internet, e-	e candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DESCRIPTION	N OF PAYMENT	AMOUNT PAID
Sadler Strategic Media, Inc.	TEL			572,818.05
Sadler Strategic Media, Inc.	RAD			52,181.95
Sadler Strategic Media, Inc.	RAD		<b>4.</b>	162,801.00
Matt Szabo	CNS			12,500.00
Your Ballot Guide (#588011)		Slate Mailer	-	10,000.00
* Decreases that are a stable of a second distance of the second dis			SUBTOTAL É	

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

SUBTOTAL \$

810,301.00

Schedule F		
<b>Accrued Expenses</b>	(Unpaid Bills)	

Type or print in ink.

Amounts may be rounded to whole dollars.

nent covers period	CALIFORNIA FORM	460
10/20/2012	Page14	of21

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

I.D. NUMBER 1348068

	Payments that are contributions or independent expenditures must also be ummarized on Schedule D.	SUBTOTALS	41,393.40	0.00	20,370.00\$	21,023.40	
_							
s	CN Strategies, Inc.	TRS	1,023.40	0.00	0.00	1,023.40	
s	CN Strategies, Inc.	CNS	20,000.00	0.00	0.00	20,000.00	
F	airbank, Maslin, Maullin, Metz & Associates	POL	20,370.00	0.00	20,370.00	0.00	
_	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	
F	CMP campaign paraphemalia/misc. CMS campaign consultants CMC civic donations CMC civic donations CMC civic donations CMC candidate filing/ballot fees CMC fundraising events CMC independent expenditure supporting/opposing others (explain)* CMC civic donations CMC candidate filing/ballot fees CMC independent expenditure supporting/opposing others (explain)* CMC civic donations CMC civi	MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads	nces earch messenger services	RAD radio airtime an RFD returned contri SAL campaign work TEL t.v. or cable air TRC candidate trave staff/spouse tra TSF transfer between VOT voter registration.	ibutions kers' salaries rtime and production costs el, lodging, and meals avel, lodging, and meals en committees of the same candidate/sponsor		

### Schedule F Summary

- 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

  NET \$ -7,637.50 | May be a negative number

### Schedule F (Continuation Sheet) **Accrued Expenses (Unpaid Bills)**

campaign literature and mailings

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

	CALIFORNIA 460
through 10/20/2012	Page15 of21
ons	I.D. NUMBER 1348068

NAME OF FILER

Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organization

CODES: If one of the following codes accurately	describes the payment, you may enter the code	e. Otherwise, describe the payment.
CMP campaign paraphernalia/misc	MRR member communications	RAD radio airtime and production co

print ads

PRT

RFD returned contributions CNS campaign consultants MTG meetings and appearances OFC office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)\* CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals candidate filing/ballot fees PHO phone banks TRS staff/spouse travel, lodging, and meals POL polling and survey research fundraising events transfer between committees of the same candidate/sponsor

independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services professional services (legal, accounting) legal defense

VOT voter registration WEB information technology costs (internet, e-mail)

TSF

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

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
SCN Strategies, Inc.	LIT	182.93	0.00	0.00	182.93
Kaufman Legal Group	PRO	12,048.00	0.00	0.00	12,048.00
Kaufman Legal Group	ofc .	101.93	0.00	0.00	101.93
NGP VAN, Inc.	OFC	0.00	232.50	0.00	232.50
	SUBTOTALS	\$ 12,332.86	232.50	0.00	12,565.36

Schedule F (Continuation Sheet) **Accrued Expenses (Unpaid Bills)** 

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

SCHEDULE F (CONT.)

(Continuation Sheet)	Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460
Accrued Expenses (Unpaid Bills)		from 10/01/2012	FORM TOO
		through10/20/2012	Page16of21
NAME OF FILER			I.D. NUMBER
Yes on Measure J - Committee for Jobs and Traffic Relief,	a Coalition of Charitable, Business and Labor Organizati	lons	1348068

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
् СТВ	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
ND	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
பா	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

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
Matt Szabo	CNS	0.00	12,500.00	0.00	12,500.00
	SUBTOTALS :	0.00	12,500.00	\$ 0.00	12,500.00

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

	SCHEDULE G
Statement covers period	CALIFORNIA 460
from10/01/2012	FORM 400
4	17 21
through 10/20/2012	Page17 of21
	I.D. NUMBER
	1340000

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations

1348068

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Sadler Strategic Media, Inc.

CC	DES: If one of the following codes accurately describe	es the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMF	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTE	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	clvic 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
ND	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
ᄪ	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
KABC-TV		TEL			240,125.00
	,				
KCAL-TV		TEL			29,580.00
				,	
				•	
KCBS-TV		TEL			71,145.00
					,
	•				
KCOP-TV		TEL			4,250.00
Δttach addition	nal information on appropriately labeled continuation sheets.	<del></del>		TOTAL* 1	345,100.00

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from  $\frac{10/01/2012}{10/20/2012}$  CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations

I.D. NUMBER 1348068

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Sadler Strategic Media, Inc.

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphemalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances returned contributions CTB contribution (explain nonmonetary)\* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating PET 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 independent expenditure supporting/opposing others (explain)\* transfer between committees of the same candidate/sponsor ND POS postage, delivery and messenger services TSF LEG legal defense professional services (legal, accounting) VOT voter registration PRO campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

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

	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
KDAY-FM	2,	RAD			6,525.00
	•				
KFWB-AM		RAD			6,800.00
KJLH-FM		RAD			6,035.00
KKGO-FM	,	RAD			11,347.50
Attach additio	nal information on appropriately labeled continuation sheets.			TOTAL*	\$ 30,707.50

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

### Schedule G Payments Made by an Agent or Independent

Type or print in ink. Amounts may be rounded

			CHEDULE G
State	ment covers period	CALIFORNIA	160
from	10/01/2012	FORM	400

Contractor (on Behalf of This Committee)	to whole dollars.	from	10/01/2012	FORM	400
SEE INSTRUCTIONS ON REVERSE		through	10/20/2012	Page19	of21
NAME OF FILER				I.D. NUMBER	
res on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Ch	naritable, Business and Labor Organizati	ons		1348068	
NAME OF AGENT OR INDEPENDENT CONTRACTOR					
Sadler Strategic Media, Inc.				~	

CC	DES: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherw	se, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RA	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFI	returned contributions
े СТВ	contribution (explain nonmonetary)*	OFC	office expenses	SA	_ campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEI	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRO	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TR	staff/spouse travel, lodging, and meals
ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSI	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VO	T voter registration
LIT	campaign literature and mailings	PRT	print ads	WE	B information technology costs (internet, e-mail)

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

17,382.50 55,420.00
31,610.00
31,610.00
31,610.00
31,610.00
27,582.50

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

		SCHEDULE
	Statement covers period	CALIFORNIA 460
	from 10/01/2012	FORM 40U
	through10/20/2012	Page of
		I.D. NUMBER
•		1340060

WEB information technology costs (e-mail)

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations

1348068

NAME OF AGENT OR INDEPENDENT CONTRACTOR

campaign literature and mailings

Sadler Strategic Media, Inc.

	COL	JES: It one of the following codes accurately describe	s tne	payment, you may enter the code.	Otherwise	e, describe the payment.
(	CMP	campaign paraphemalia/misc.	MBR	member communications	RAD	radio airtime and production costs
(	CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
) (	ств	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
F	FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
F	-ND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
	ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
ı		legal defense	PRO	professional services (legal, accounting)	VOT	voter registration

print ads

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	2	AMOUNT PAID
KSWD-PM	RAD			120	18,105.00
				i.	
				•	
KTLA-TV	TEL			£	40,778.75
KTLK-AM	RAD				4,080.00
·					
KTTV-TV	TEL				27,157.50
Attach additional information on appropriately labeled continuation sheet	ts.			TOTAL* \$	90,121.25

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

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

SCHEDULE G Statement covers period CALIFORNIA 10/01/2012 **FORM** from 10/20/2012 through I.D. NUMBER

 INICTO	CTION	CONIE	REVERSE

NAME OF FILER

Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations

1348068

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Sadler Strategic Media, Inc.

CODES: If o	one of the following codes accurately	describes the payment, you n	nay 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
	legal defense	PRO	professional services (legal, accounting)		voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Time Warner Cable	TEL			71,916.8
otal Traffic Network	TEL	_	·	12,750.
·				,
		_		
Attach additional information on appropriately labeled continuation sheets.			TOT	AL* \$ 84,666.1

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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