

497 Contribution Report

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

0012-LC

RECEIVED BY 497 CONTRIBUTION REPORT

NAME OF FILER Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations		Date of This Filing <u>11/05/2012</u>	Date Stamp 2012 NOV -7 AM 11:11 CAMPAIGN FINANCE DISCLOSURE SECTION 610470
AREA CODE/PHONE NUMBER	I.D. NUMBER (If applicable) 1348068	Report No. <u>001</u>	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY	STATE	ZIP CODE	No. of Pages <u>1</u>

1. Contribution(s) Received

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
11/05/2012	International Brotherhood of Teamsters	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		25,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: _____

*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

H P

P. 001

FAX No.

NOV/05/2012/MON 07:36 PM

497 Contribution Report

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5012-LC

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497 CONTRIBUTION REPORT

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

Date of This Filing 11/02/2012

LOS ANGELES COUNTY Date Stamp

CALIFORNIA FORM **497**

AREA CODE/PHONE NUMBER

I.D. NUMBER (if applicable)

1348068

Report No. 001

2012 NOV -5 PM 1:40

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STREET ADDRESS

Amendment to Report No. (explain below)

CAMPAIGN FINANCE DISCLOSURE SECTION

610470

CITY

STATE

ZIP CODE

No. of Pages 2

1. Contribution(s) Received

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
11/01/2012	SolarCity Corporation	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
11/02/2012	Teamsters Local Union No. 572 Affiliated with the International Brotherhood of Teamsters	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
11/01/2012	DTU Collective Bargaining Defense Fund	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		25,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: _____

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 OTH - Other (e.g., business entity)
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P. 002

FAX No.

NOV/02/2012/FRI 05:58 PM

Prop 5

P. 001/001

Page 1

497 Contribution Report

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0012-CC

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497 CONTRIBUTION REPORT

NAME OF FILER Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations		Date of This Filing 11/01/2012	LOS / Date Stamp 2012 NOV -2 PM 3:21 CAMPAIGN FINANCE DISCLOSURE SECTION 610470	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1348068	Report No. 001		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY	STATE	ZIP CODE	No. of Pages 1	

1. Contribution(s) Received

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
10/31/2012	Associated General Contractors Issues PAC (#970230)	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/31/2012	RBF Consulting	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: _____

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 SCC - Small Contributor Committee

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FAX No.

NOV/01/2012/THU 05:49 PM

497 Contribution Report

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0012-CC

RECEIVED BY
LOS ANGELES COUNTY 497 CONTRIBUTION REPORT

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

Date of This Filing 10/31/2012

Date Stamp
2012 NOV -1 PM 2:00

CALIFORNIA FORM **497**

AREA CODE/PHONE NUMBER

I.D. NUMBER (if applicable)
1348068

Report No. 001

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STREET ADDRESS

Amendment to Report No. _____
(explain below)

CAMPAIGN FINANCE DISCLOSURE SECTION

G10470

CITY STATE ZIP CODE

No. of Pages 1

1. Contribution(s) Received

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
10/30/2012	Arcadis	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		 <input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: _____

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P. 001

FAX No.

OCT/31/2012/WED 04:58 PM

Prop J

HP

497 Contribution Report

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1012-LC

497 CONTRIBUTION REPORT

POP

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

AREA CODE/PHONE NUMBER

I.D. NUMBER (if applicable)

1348068

STREET ADDRESS

CITY

STATE

ZIP CODE

Date of This Filing 10/30/2012

Report No. 001

Amendment to Report No. (explain below)

No. of Pages 1

RECEIVED BY
LOS ANGELES COUNTY
2012 OCT 31 AM 8:50
CAMPAIGN FINANCE
DISCLOSURE SECTION

CALIFORNIA FORM 497

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610470

1. Contribution(s) Received

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
10/29/2012	Los Angeles County Democratic Party Issues & Advocacy Committee (#744554)	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00 <input type="checkbox"/> Check If Loan _____% Provide interest rate
10/29/2012	Sheet Metal Workers International Association Local Union 105	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		25,000.00 <input type="checkbox"/> Check If Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		 <input type="checkbox"/> Check If Loan _____% Provide interest rate

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 PTY - Political Party
 SCC - Small Contributor Committee

Reason for Amendment: _____

H/P

P. 001

FAX No.

OCT/30/2012/TUE 05:54 PM

P. 001/003

Prop J

497 Contribution Report

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Amounts may be rounded to whole dollars.

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497 CONTRIBUTION REPORT

NAME OF FILER Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations		Date of This Filing 10/29/2012	Date Stamp 2012 OCT 31 AM 9: 11 CAMPAIGN FINANCE DISCLOSURE SECTION	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (If applicable) 1348068	Report No. 001		
STREET ADDRESS		<input checked="" type="checkbox"/> Amendment to Report No. 001 (explain below)	610470	
CITY	STATE ZIP CODE	No. of Pages 3		

1. Contribution(s) Received

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
10/25/2012	California State Council of Laborers Issues PAC (#1240169)	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		50,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/25/2012	Cement Masons Local Union No. 500	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/25/2012	Jacobs Engineering Group, Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		8,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: Update Contributor Information

*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

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FAX No.

OCT/29/2012/MON 05:26 PM

497 Contribution Report

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RECEIVED BY
LOS ANGELES COUNTY
Date Stamp
2012 OCT 31 AM 9:01
CALIFORNIA FINANCE
DISCLOSURE SECTION

497 CONTRIBUTION REPORT

NAME OF FILER Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations		Date of This Filing 10/29/2012	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1348068	Report No. 001	
STREET ADDRESS		<input checked="" type="checkbox"/> Amendment to Report No. 001 (explain below)	
CITY	STATE	ZIP CODE	No. of Pages 3

1. Contribution(s) Received

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
10/25/2012	Laborers International Union of N.A.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200,000.00 <input type="checkbox"/> Check if Loan _____% Provide Interest rate
10/25/2012	Plasterers' Cement Masons' & Shop Hands PAC	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10,000.00 <input type="checkbox"/> Check if Loan _____% Provide Interest rate
10/25/2012	Senator Alex Padilla's Ballot Measure Committee, California 2020 (#1305444)	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		24,459.45 <input type="checkbox"/> Check if Loan _____% Provide Interest rate

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Reason for Amendment: Update Contributor Information

497 Contribution Report

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LOS ANGELES COUNTY
Date Stamp

497 CONTRIBUTION REPORT

CALIFORNIA FORM **497**
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NAME OF FILER
Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations

Date of This Filing 10/29/2012

AREA CODE/PHONE NUMBER

I.D. NUMBER (if applicable)

1348068

Report No. 001 2012

OCT 31 AM 9:01

STREET ADDRESS

Amendment to Report No. 001
(explain below)

CAMPAIGN FINANCE DISCLOSURE SECTION

CITY

STATE

ZIP CODE

No. of Pages 3

1. Contribution(s) Received

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
10/26/2012	SN Regional Council of Carpenters Issues Committee (#1301846)	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/26/2012	The Zenith	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/25/2012	Bob Tuttle	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Executive Tuttle-Click Automotive Group	5,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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OTH - Other (e.g., business entity)
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Update Contributor Information

Reason for Amendment: _____

497 Contribution Report

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6012-LC

RECEIVED BY
LOS ANGELES COUNTY
Date Stamp
2012 OCT 31 AM 8:55
CALIFORNIA FINANCE
DISCLOSURE SECTION

497 CONTRIBUTION REPORT

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

Date of This Filing 10/26/2012

CALIFORNIA FORM 497

AREA CODE/PHONE NUMBER

I.D. NUMBER (if applicable)

1348068

Report No. 001

For Official Use Only

STREET ADDRESS

Amendment to Report No. _____
(explain below)

CITY

STATE

ZIP CODE

No. of Pages 3

610470

1. Contribution(s) Received

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
10/25/2012	California State Council of Laborers Issues PAC (#1240169)	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		50,000.00 <input type="checkbox"/> Check if Loan _____% Provide Interest rate
10/25/2012	Cement Masons Local Union No. 500	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00 <input type="checkbox"/> Check if Loan _____% Provide Interest rate
10/25/2012	Jacobs Engineering Group, Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		8,000.00 <input type="checkbox"/> Check if Loan _____% Provide Interest rate

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Reason for Amendment: _____

HP

P: 001/003

FAX No.

OCT/26/2012/FRI 06:34 PM

497 Contribution Report

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497 CONTRIBUTION REPORT

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

Date of This Filing 10/26/2012

LOS ANGELES COUNTY
Date Stamp

CALIFORNIA FORM 497

AREA CODE/PHONE NUMBER

I.D. NUMBER (if applicable)

Report No. 001

2012 OCT 31 AM 8:55

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STREET ADDRESS

Amendment to Report No. _____
(explain below)

CASPER POLICE DISCLOSURE SECTION

CITY STATE ZIP CODE

No. of Pages 3

1. Contribution(s) Received

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
10/25/2012	Laborers International Union of N.A.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/25/2012	Plasterers' Cement Masons' & Shop Hands PAC	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/25/2012	Senator Alex Padilla's Ballot Measure Committee, California 2020 (#1305444)	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		24,459.45 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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Reason for Amendment: _____

P. 002/003

FAX No.

OCT/26/2012/FRI 06:34 PM

497 Contribution Report

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RECEIVED BY LOS ANGELES COUNTY CALIFORNIA FORM 497 497 CONTRIBUTION REPORT

NAME OF FILER Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations		Date of This Filing 10/26/2012	RECEIVED BY LOS ANGELES COUNTY CALIFORNIA FORM 497 2012 OCT 31 AM 8:56 For Official Use Only DISCLOSURE SECTION
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1348068	Report No. 001	
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	
CITY	STATE	ZIP CODE	
No. of Pages 3			

1. Contribution(s) Received

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
10/26/2012	SW Regional Council of Carpenters Issues Committee (#1301846)	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/26/2012	The Zenith	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/25/2012	Bob Tuttle	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Information Requested	5,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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P: 003/003
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P. 001/001

FAX No.

OCT/25/2012/THU 08:53 PM

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DD12-LC

497 CONTRIBUTION REPORT

Prop J

NAME OF FILER Yes on Measure J - Committee for Jobs and Traffic Relief, a Coalition of Charitable, Business and Labor Organizations		Date of This Filing 10/25/2012	RECEIVED BY LOS ANGELES COUNTY Date Stamp 2012 OCT 31 AM 8:55 CAMPAIGN FINANCE DISCLOSURE SECTION	CALIFORNIA FORM 497 For Official Use Only 610470
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1348068	Report No. 001		
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10/24/2012	Fluor Daniel, Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		25,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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JP

0012 LC

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AREA CODE/PHONE NUMBER

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2012 OCT 31 AM 8:56

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(explain below)

CAMPAIGN FINANCE DISCLOSURE SECTION

CITY STATE ZIP CODE

No. of Pages 1

610470

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10/24/2012	Local Union No. 11 International Brotherhood of Electrical Workers	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/24/2012	Related Companies	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		25,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
10/24/2012	STV Engineers/Architects/Planners	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		50,000.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate

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FAX No.

OCT/24/2012/WED 09:29 PM