Recipient Committee	Type or print in ink.		Date Stamp	- CA	SHORT FOR
Campaign Statement – Short Form		- <del>-</del> 1 n	П		FORM 450
For use by recipient committees that have not received a contribution or other receipt that must be itemized, have not	Statement covers period from01/01/12	Date of election if applicable. (Month, Day, Year)	MAR <b>2</b> 6 3	اوم ا	
received or made loans, and have no outstanding accrued expenses.	through03/17/12	06/05/12		İ	,
1. Type of Recipient Committee:		2. Type of Statement:	SNO COUN	My CLLIN	
Primarily Formed Sp	al Purpose Committee onsored nall Contributor Committee	Pre-election Statement Semi-annual Statement Termination Statement	Harris	<ul><li>☐ Special O</li><li>☐ Suppleme</li></ul>	Statement idd-year Report ental Pre-election
Primarily Formed Candidate/ Officeholder Committee		Amendment (Explain) (Also check type of statement you	are amending)	Statemen	t - Attach Form 495
3. Committee Information	I.D. NUMBER 870153	Treasurer(s)			
COMMITTEE NAME		NAME OF TREASURER			
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE		LORETTA KULLBERG MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)		1360 VAN NESS			
1360 VAN NESS		CITY	STATE	ZIP CODE	AREA CODE/PHONE
CITY STATE ZIP CO	DE AREA CODE/PHONE	FRESNO NAME OF ASSISTANT TREASURER, IF A	CA	93721	559.268.3372
FRESNO CA 9372		ERIC SCHMIDT	NY		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	X	MAILING ADDRESS			
CITY STATE ZIP CO	DE AREA CODE/PHONE	1360 VAN NESS			
		FRESNO	STATE <b>CA</b>	ZIP CODE 93721	AREA CODE/PHONE 559.268.3372
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX/E-MAIL ADDRESS			000.200.0072
4. Verification I have used all reasonable diligence in preparing and re under penalty of perjury under the laws of the State of 0  Executed on	By SIGNATURE OF CONTROLLING C	est of my knowledge the information cound correct.  SIGNATURE OF TREASURED OR ASSISTANT TR  DEFICEHOLDER, CANDIDATE, STATE MEASURE PROPO	EASURER DNENT, OR RESPO	ONSIBLE OFFICER (	<u> </u>
Executed on	Ву				
DATE	SIGNATURE	OF CONTROLLING OFFICEHOLDER, CANDIDATE, STA	TE MEASURE PF	ROPONENT	

### **Recipient Committee Campaign Statement Summary Page**

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

SHORT FORM Statement covers period CALIFORNIA 01/01/12 **FORM** 03/17/12

from through. Page \_\_ NAME OF COMMITTEE I.D. NUMBER FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE 870153 **Expenditures Made**  Expenditures of \$100 or more made this period...... 4,500.00 2. Expenditures under \$100 made this period (Not itemized.) 0.00 4,500.00 0.00 (If this is the first statement for the calendar year, enter zero.) 0.00 4,500.00 **Contributions Received** 7. Monetary contributions received this period ......\$\_\_\_\_\_\_\$ 2,885.00 8. Non-monetary contributions received this period..... 0.00 (If this is the first statement for the calendar year, enter zero.) 0.00 2,885.00 **Current Cash Statement** 24,637,83 2,885.00 13. Miscellaneous increases to cash ..... 0.00 4,500.00 23,022.83

### Recipient Committee Campaign Statement – Short Form

Type or print in ink.

Amounts may be rounded to whole dollars.

04-4	SHORT FORM
Statement covers period 61/01/12	california 450
through03/17/12	Page 3 of 3
	I.D. NUMBER
	870153

SEE INSTRUCTIONS ON REVERSE

NAME OF COMMITTEE

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

	, , , , , , , , , , , , , , , , , , , ,	onal copies of this page for continu	lation sneets.)		
DATE*	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	NAME OF CANDIDATE AND OFFICE OR NAME OF BALLOT MEASURE AND BALLOT NUMBER OR LETTER AND JURISDICTION	AMOUNT THIS PERIOD	CUMULATIVE AMOUNTS TO DATE*
02/02/12	ANDREAS BORGEAS FOR FRESNO COUNTY SUPERVISOR 2012 7081 N. MARKS AVE., SUITE 104 PMB #220 FRESNO, CA 93712 FPPC #1336479	CONTRIBUTION	ANDREAS BORGEAS FRESNO CO. SUPERVISOR  Support Oppose	\$2,000.00	Calendar Year  \$ Other
			Contribution Ind. Exp.		\$
03/12/12	ANDREAS BORGEAS FOR FRESNO COUNTY SUPERVISOR 2012 7081 N. MARKS AVE., SUITE 104 PMB #220 FRESNO, CA 93712 FPPC #1336479	CONTRIBUTION	ANDREAS BORGEAS FRESNO CO. SUPERVISOR  Support Oppose	\$2,500.00	Calendar Year \$4,500.00 Other
			Contribution Ind. Exp.		\$
					Calendar Year  \$ Other
			Support Oppose Ind. Exp.		\$
			SUBTOTAL \$	4,500.00	

<sup>\*</sup> Required only for payments which are contributions or independent expenditures.

Recipient Committee Campaign Statement – Short Form	Type or print in ink.		Date Stamp	CALIFORNIA 150
그 그는 사람들은 本語 大道		115		FORM 45U
SEE INSTRUCTIONS ON REVERSE  For use by recipient committees that have not received a	Statement covers period from 03/18/12	Date of election if applicable: (Month, Day, Year)		Page 1 of 3
contribution or other receipt that must be itemized, have not received or made loans, and have no outstanding accrued expenses.	through05/19/12	06/05/12	MAY 21 2 RESNO COUNTY	
1. Type of Recipient Committee:		2. Type of Statement:	mile //	W B
Primarily Formed Sp	al Purpose Committee onsored all Contributor Committee	▶ Pre-election Statement	☐ Sp ☐ Su	DEPUTY uarterly Statement pecial Odd-year Report upplemental Pre-election atement - Attach Form 495
Primarily Formed Candidate/ Officeholder Committee		Amendment (Explain) (Also check type of statement you		7.4.65.1.7.61.11.400
3. Committee Information	I.D. NUMBER 870153	Treasurer(s)		
COMMITTEE NAME FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE		NAME OF TREASURER  LORETTA KULLBERG  MAILING ADDRESS	ت ت	*
STREET ADDRESS (NO P.O. BOX) 1360 VAN NESS		1360 VAN NESS	STATE ZIP (	TO DE TIONE
CITY STATE ZIP COI FRESNO CA 9372		FRESNO  NAME OF ASSISTANT TREASURER, IF AN  ERIC SCHMIDT	CA 937	21 559.268.3372
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	x	MAILING ADDRESS 1360 VAN NESS		
CITY STATE ZIP COL	DE AREA CODE/PHONE	CITY FRESNO	STATE ZIP C	
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS		300.230.0072
I. Verification I have used all reasonable diligence in preparing and reunder penalty of perjury under the laws of the State of C  Executed on	ByByBy	SIGNATURE OF THEASURER OR ASSISTANT TRE	EASURER NENT, OR RESPONSIBLE	OFFICER OF SPONSOR
DATE  Executed on	SIGNATUR	RE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STAT	TE MEASURE PROPONEN	ı <del>ı</del>
DATE	BySIGNATUS	RE OF CONTROLLING OFFICEHOLDER CANDIDATE STAT	E ME I DUDE DE LE	

# Recipient Committee

Type or print in ink,

SHORT FORM

Recipient Committee	Type or print in ink.	Statement covers period		SHORT FOR
Campaign Statement Summary Page	Amounts may be rounded to whole dollars.	from03/18/12	CALIFORNIA FORM	450
Julimary Page		through05/19/12	Page2	of3
NAME OF COMMITTEE			I.D. NUMBER	
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICA	L ACTION COMMITTEE		870153	
Expenditures Made			<u> </u>	
1. Expenditures of \$100 or more made this period		er.	\$	3,900.00
2. Expenditures under \$100 made this period (Not itemized.	)			40.00
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD				3,940.00
4. Nonmonetary Adjustment		From Line 8 Below	· · · · · · · · · · · · · · · · · · ·	0.00
5. Total expenditures made from previous statement	ero.)	Previous Summary Page, Line 6	\$	4,500.00
6. TOTAL EXPENDITURES MADE TO DATE		Add Lines 3 + 4 + 5	\$	8,440.00
Contributions Received				
7. Monetary contributions received this period			\$	2,901.00
8. Non-monetary contributions received this period	•			0.00
9. Total contributions received from previous statement (If this is the first statement for the calendar year, enter ze	Pı	evious Summary Page, Line 10	\$	2,885.00
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE		Add Lines 7 + 8 + 9	\$	5,786.00
Current Cash Statement				
11. Beginning cash balance	Pr	evious Summary Page, Line 15	\$2	3,022.83
12. Cash receipts this period				2,901.00
13. Miscellaneous increases to cash	······································		\$	0.00
14. Cash expenditures this period		and the second s	•	3,940.00
15. ENDING CASH BALANCE THIS PERIOD			· \$ 2	1,983.83

### Recipient Committee Campaign Statement – Short Form

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA 150
from03/18/12	FORM 450
through05/19/12	Page 3 of 3
	I.D. NUMBER

870153

SEE INSTRUCTIONS ON REVERSE

NAME OF COMMITTEE

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

· .	·		addit sitects.)		
DATE*	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	NAME OF CANDIDATE AND OFFICE OR NAME OF BALLOT MEASURE AND BALLOT NUMBER OR LETTER AND JURISDICTION	AMOUNT THIS PERIOD	CUMULATIVE AMOUNTS TO DATE*
04/24/12	JAMES PATTERSON FOR ASSEMBLY 2012 544 VAN NESS AVE. FRESNO, CA 93721	CONTRIBUTION	JAMES PATTERSON	3,900.00	Calendar Year  \$ 3,900.00  Other
	FPPC #1346331				\$
					Calendar Year
			☐ Support ☐ Oppose		SOther
			☐ Contribution ☐ Ind. Exp.		\$Calendar Year
,					S
			☐ Support ☐ Oppose ☐ Contribution ☐ Ind. Exp.		\$
			SUBTOTAL \$	3,900.00	

<sup>\*</sup> Required only for payments which are contributions or independent expenditures.

Recipient Committee Campaign Statement – Short Form	Type or print in ink.			SHORT FORM
SEE INSTRUCTIONS ON REVERSE  For use by recipient committees that have not received a	Statement covers period from5/20/12	Date of election if applicable: (Month, Day, Year)	12 2012 Page	
contribution or other receipt that must be itemized, have not received or made loans, and have no outstanding accrued expenses.	through6/30/12	ERESN Ey Tau	O COUNTY CLERK	-
1. Type of Recipient Committee:		2. Type of Statement:	DEPUT	Y =
○ Primarily Formed Sp	ral Purpose Committee onsored nall Contributor Committee	☐ Pre-election Statement  Semi-annual Statement ☐ Termination Statement	☐ Supplemer	Statement Id-year Report ntal Pre-election - Attach Form 495
<ul><li>Primarily Formed Candidate/</li><li>Officeholder Committee</li></ul>		Amendment (Explain) (Also check type of statement you are a	amending)	
3. Committee Information	I.D. NUMBER 870153	Treasurer(s)		
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLTICAL ACTION COMMITTEE		NAME OF TREASURER  LORETTA KULLBERG  MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX) 1360 VAN NESS		CITY FRESNO	STATE ZIP CODE  CA 93721	AREA CODE/PHONE
CITY. STATE ZIP CO FRESNO CA 9372		NAME OF ASSISTANT TREASURER, IF ANY	OA 93721	559.268.3372
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO		ERIC SCHMIDT  MAILING ADDRESS  1360 VAN NESS	<u> </u>	
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY FRESNO	STATE ZIP CODE  CA 93721	AREA CODE/PHONE 559.268.3372
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS		
4. Verification I have used all reasonable diligence in preparing and reunder penalty of perjury under the laws of the State of  Executed on	eviewing this statement and to the b California that the foregoing is true	pest of my knowledge the information contained correct  SIGNATURE OF THEASURER OR ASSISTANT TREAS		complete. I certify
Executed on	BySIGNATURE OF CONTROLLING	OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONEN	NT, OR RESPONSIBLE OFFICER	OF SPONSOR
Executed on	Ву	RE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE I		
Executed on	Ву	RE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE I		·

## **Recipient Committee**

Type or print in ink.
Amounts may be rounded

SHORT FORM Statement covers period CALIFORNIA

Campaign Statement Summary Page	to whole dollars.	from5/20/12	CALIFOR FORIV	
		through6/30/12	Page	2 of 2
NAME OF COMMITTEE			I.D. NUMBEI	R
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL	ACTION COMMITTEE		870153	
Expenditures Made				· · · · · · · · ·
Expenditures of \$100 or more made this period			\$	0.00
2. Expenditures under \$100 made this period (Not itemized.)		, , , , , , , , , , , , , , , , , , ,		0.00
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD		Add Lines 1 + 2	\$	0.00
4. Nonmonetary Adjustment	······	From Line 8 Below	,	0.00
5. Total expenditures made from previous statement(If this is the first statement for the calendar year, enter zero.		Previous Summary Page, Line 6	\$ <u></u>	8,440.00
6. TOTAL EXPENDITURES MADE TO DATE		Add Lines 3 + 4 + 5	\$	8,440.00
Contributions Received			•	
7. Monetary contributions received this period			\$	1,779.00
8. Non-monetary contributions received this period				0.00
<ol> <li>Total contributions received from previous statement</li></ol>	<i>F</i>	revious Summary Page, Line 10	\$	5,786.00
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE		Add Lines 7 + 8 + 9	\$	7,565.00
Current Cash Statement				
11. Beginning cash balance	<i>.</i>	revious Summary Page, Line 15	\$	21,983.83
12. Cash receipts this period	······································	Line 7 above		1,779.00
13. Miscellaneous increases to cash			\$	0.00
14. Cash expenditures this period		Line 3 above		0.00
15 ENDING CASH BALANCE THIS PERIOD	Add Lines 11	+ 12 + 13, then subtract Line 14	\$	23,762.83

Recipient Committee Campaign Statement – Short Form	Type or print in ink.	Pate L	e Stamp	SHORT FORM 450 FORM
SEE INSTRUCTIONS ON REVERSE  For use by recipient committees that have not received a contribution or other receipt that must be itemized, have not	Statement covers period from 07/01/12	Date of election if applicable: (Month, Day, Year)	- 2012 Pa	ge1 of4
received or made loans, and have no outstanding accrued expenses.	through09/30/12	11/06/12 FRESNO COU	UNTY CLERK	
1. Type of Recipient Committee:		2. Type of Statement:	DEPUTY	
○ Primarily Formed	eral Purpose Committee sponsored small Contributor Committee	Pre-election Statement Semi-annual Statement Termination Statement  Amendment (Explain) (Also check type of statement you are an	Special CSupplem Statemer	y Statement Odd-year Report ental Pre-election nt - Attach Form 495
3. Committee Information	i.D. NUMBER	Treasurer(s)		
	870153			
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE	N	LORETTA KULLBERG  MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		1360 VAN NESS	STATE ZID CODE	ADEA CODE/DUONE
1360 VAN NESS		FRESNO	STATE ZIP CODE <b>CA 93721</b>	AREA CODE/PHONE 559.268.3372
CITY STATE ZIP C		NAME OF ASSISTANT TREASURER, IF ANY		1 1000 1000
FRESNO CA 937 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	······	ERIC SCHMIDT  MAILING ADDRESS		
CITY STATE ZIP C	CODE AREA CODE/PHONE	1360 VAN NESS CITY FRESNO	STATE ZIP CODE CA 93721	AREA CODE/PHONE 559.268.3372
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS		
4. Verification I have used all reasonable diligence in preparing and under penalty of perjury under the laws of the State of Executed on	By SIGNATURE OF CONTROLLING	best of my knowledge the information contain and correct.  SIGNATURE OF TREASURER OR ASSISTANT TREASURE OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT  URE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE	IRER F, OR RESPONSIBLE OFFICI	·····
Executed on	By	TRE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MI	EASUKE PROPUNENT	
DATE		JRE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MI	EASURE PROPONENT	<del></del>

# Recipient Committee Campaign Statement

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

SHORT FORM Statement covers period CALIFORNIA 07/01/12

Summary Page	from	FORM TOO	
	through09/30/12	Page 2 of 4	
NAME OF COMMITTEE		I.D. NUMBER	
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE		870153	
Expenditures Made			
Expenditures of \$100 or more made this period		\$5,700.00	
Expenditures under \$100 made this period (Not itemized.)		40.00	
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD	Add Lines 1 + 2	\$5,700.00	
Nonmonetary Adjustment	From Line 8 Below	0.00	
5. Total expenditures made from previous statement	Previous Summary Page, Line 6	\$8,400.00	
5. TOTAL EXPENDITURES MADE TO DATE		\$	
Contributions Received			
7. Monetary contributions received this period		\$3,665.50	
Non-monetary contributions received this period		0.00	
7. Total contributions received from previous statement	Previous Summary Page, Line 10	\$7,565.00	
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE		\$11,230.50	
Current Cash Statement			
11. Beginning cash balance	Previous Summary Page, Line 15	\$ 23,762.83	
12. Cash receipts this period	Line 7 above	3,665.50	
13. Miscellaneous increases to cash		\$0.00	
14. Cash expenditures this period	Line 3 above	5,700.00	
15. ENDING CASH BALANCE THIS PERIOD	dd Lines 11 + 12 + 13, then subtract Line 14	\$21,728.33	

### Recipient Committee Campaign Statement – Short Form

Type or print in ink.

Amounts may be rounded to whole dollars.

	SHORT FORM
Statement covers period from07/01/12	CALIFORNIA 450
through09/30/12	Page 3 of 4
	I.D. NUMBER
	870153

SEE INSTRUCTIONS ON REVERSE

NAME OF COMMITTEE

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

DATE*	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	DESCRIPTION OF PAYMENT	NAME OF CANDIDATE AND OFFICE OR NAME OF BALLOT MEASURE AND BALLOT NUMBER OR LETTER AND JURISDICTION	AMOUNT THIS PERIOD	CUMULATIVE AMOUNTS TO DATE*
07/17/12	FRIENDS OF ANDREAS BORGEAS FOR COUNTY SUPERVISOR 7081 N, MARKS, SUITE 104 PMB# 220 FRESNO, CA 93711 FPPC #1336479	CONTRIBUTION	ANDREAS BORGEAS FRESNO COUNTY SUPERVISOR  Support Oppose Contribution Ind. Exp.	1,000.00	Calendar Year  \$  Other
09/04/02	MARGARET MIMS FOR SHERIFF 504 VAN NESS FRESNO, CA 93721 FPPC #1283613	CONTRIBUTION	MARGARET MIMS FRESNO COUNTY SHERIFF  Support Oppose	300.00	Calendar Year  \$Other
			Contribution Ind. Exp.		\$
09/14/12	JAMES PATTERSON FOR ASSEMBLY 2012 504 VAN NESS FRESNO, CA 93721 FPPC #1346331	CONTRIBUTION	JAMES PATTERSON STATE ASSEMBLY	3,900.00	Calendar Year 7,800.00 Other
			Support Oppose Contribution Ind. Exp.		\$
SUBTOTAL \$ 5,200.00					

<sup>\*</sup> Required only for payments which are contributions or independent expenditures.

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SEE INSTRUCTIONS ON REVERSE

NAME OF COMMITTEE

### Recipient Committee Campaign Statement – Short Form

Type or print in ink.

Amounts may be rounded to whole dollars.

	SHUKT FUKIV
Statement covers period from07/01/12	california 450 form
through09/30/12	Page4 of4
	I.D. NUMBER
	870153

SHORT FORM

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

DATE*	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD NUMBER)	DESCRIPTION OF PAYMENT	NAME OF CANDIDATE AND OFFICE OR NAME OF BALLOT MEASURE AND BALLOT NUMBER OR LETTER AND JURISDICTION	AMOUNT THIS PERIOD	CUMULATIVE AMOUNTS TO DATE*
09/17/12	EGAN FOR DISTRICT ATTORNEY P.O. BOX 606 FRESNO, CA 93709-0606 FPPC #1235402	CONTRIBUTION	ELIZABETH EGAN DISTRICT ATTORNEY  Support Oppose Contribution Ind. Exp.	500.00	Calendar Year  \$  S
					Calendar Year  \$ Other
			Support Oppose Contribution Ind. Exp.		\$ Calendar Year
					\$Other
			Support Oppose Contribution Ind. Exp.		\$
SUBTOTAL \$ 500.00					

<sup>\*</sup> Required only for payments which are contributions or independent expenditures.

Type or print in ink.	E	Date Stamp	CALIFORNIA 450
Statement covers period from10/01/12	Date of election if applicable: (Month, Day, Year)	JAN <b>2 8</b> 2013	Page1 of2 For Official Use Only
through12/31/12	11/06/12	FRESHO COUNTY CLERK	
	77	y y y hen	
onsored	☐ Pre-election Stater☐ Semi-annual State	ment 🗷 Quar ment 🗀 Spec nent 🗀 Supp	terly Statement ial Odd-year Report demental Pre-election ment - Attach Form 495
		ain)	The Market of the Association of
I.D. NUMBER 870153	Treasurer(s)	·	
	NAME OF TREASURER LORETTA KULLBERG MAILING ADDRESS.		
	CITY FRESNO	CA 93721	
	ERIC SCHMIDT MAILING ADDRESS		
DE AREA CODE/PHONE	1360 VAN NESS		: The top be the top to the top t
			559.268.3372
By SIGNATURE OF CONTROLLING OF	SIGNATURE OF TREASURER OR ASSI	STANT TREASURER RE PROPONENT, OR RESPONSIBLE OF	
	Statement covers period  from 10/01/12  through 12/31/12  ral Purpose Committee consored mall Contributor Committee  I.D. NUMBER 870153  DE AREA CODE/PHONE 1 559.268.3372  DX  DE AREA CODE/PHONE  California that the foregoing is true for By  SIGNATURE OF CONTROLLING OF By  SIGNATURE OF CONTROLLING OF By	Statement covers period from 10/01/12	Statement covers period from 10/01/12   Date of election if applicable: (Month, Day, Year)   JAN 2 8 2013      Introduct

#### Recipient Committee Campaign Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period 10/01/12 CALIFORNIA FORM

Campaign Statement Summary Page	Amounts may be rounded to whole dollars.	from 10/01/12	CALIFORNIA 450	
	•	through12/31/12	Page	2 of 2
NAME OF COMMITTEE			I.D. NUMBE	
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL AC	TION COMMITTEE		870153	
Expenditures Made				
Expenditures of \$100 or more made this period	***************************************		<b>C</b>	0.00
2. Expenditures under \$100 made this period (Not itemized.)			Ψ	0.00
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD		Add Lines 1 + 2	<b>c</b>	0.00
Nonmonetary Adjustment		From Lino 9 Polow		0.00
5. Total expenditures made from previous statement (If this is the first statement for the calendar year, enter zero.)	······	Previous Summary Page, Line 6	\$	14,100.00
6. TOTAL EXPENDITURES MADE TO DATE		Add Lines 2 + 4 + 5		14,100.00
		Aud Ellies 3 + 4 + 5	<b>4</b>	,
Contributions Received				
7. Monetary contributions received this period		<u> </u>	<b>Q</b>	4,423.50
Non-monetary contributions received this period				0.00
9. Total contributions received from previous statement		Previous Summary Page, Line 10	\$	11,230.50
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE		Add Lines 7 + 8 + 9	\$	15.654.00
Current Cash Statement			-	
11. Beginning cash balance		Previous Summany Page 1 inc 15	•	21,728.33
12. Cash receipts this period	•		Ψ <del></del>	4,423.50
13. Miscellaneous increases to cash		•	<u> </u>	0.00
14. Cash expenditures this period			<b>.</b>	0.00
15. ENDING CASH BALANCE THIS PERIOD		11 + 12 + 13 then subtract Line 14	•	26,151.83