

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

CALIFORNIA FORM 460

RECEIVED

Date Stamp
MAR - 9 2010

Page 1 of 4

For Official Use Only

Date of election if applicable:
(Month, Day, Year)

11-04-08 CITY MANAGER/CITY CLERK

Statement covers period

from 10-19-08

through 12-31-08

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
- State Candidate Election Committee
- Recall (Also Complete Part 5)
- General Purpose Committee
- Sponsored
- Small Contributor Committee
- Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
- Controlled
- Sponsored (Also Complete Part 5)
- Primarily Formed Candidate/Officeholder Committee (Also Complete Part 7)

2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement (Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

Requested by FPPC investigator Janet Seely

3. Committee Information

I.D. NUMBER 1321596

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

George Barich

Treasurer(s)

NAME OF TREASURER

George Barich

MAILING ADDRESS

STREET ADDRESS (NO P.O. BOX)

[REDACTED]

CITY

STATE CA ZIP CODE 94931

AREA CODE/PHONE

[REDACTED]

CITY

STATE CA ZIP CODE 94931

AREA CODE/PHONE

[REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY

STATE CA ZIP CODE

AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 3-9-10

Date

Executed on 3-9-10

Date

Executed on

Date

Executed on

Date

[REDACTED SIGNATURES]

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

CALIFORNIA
FORM 460

Statement covers period
from 10-19-08
through 12-31-08

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

George Barich

I.D. NUMBER

1321596

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3 \$ 0	\$ 0
2. Loans Received	Schedule B, Line 3 0	3,000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2 0	3,000.00
4. Nonmonetary Contributions	Schedule C, Line 3 0	
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4 \$ 0	\$ 3,000.00

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

7/1 through 6/30 7/1 to Date

20. Contributions Received \$ _____

21. Expenditures Made \$ _____

Expenditures Made

6. Payments Made	Schedule E, Line 4 \$ 538.75	\$ 2,009.44
7. Loans Made	Schedule H, Line 3 0	0
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7 538.75	2,009.44
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3 0	0
10. Nonmonetary Adjustment	Schedule C, Line 3 0	0
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10 \$ 538.75	\$ 2,009.44

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy) _____ Total to Date \$ _____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16 \$ 1,529.31
13. Cash Receipts	Column A, Line 3 above 0
14. Miscellaneous Increases to Cash	Schedule I, Line 4 0
15. Cash Payments	Column A, Line 8 above 538.75
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 \$ 990.56

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED

Cash Equivalents and Outstanding Debts

18. Cash Equivalents

19. Outstanding Debts

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

*Amounts in this section may be different from amounts reported in Column B.

**Schedule B - Part 1
Loans Received**

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

Statement covers period
from 10-19-08
through 12-31-08

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

George Barich

I.D. NUMBER

1321596

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD*	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE	CALENDAR YEAR	
									PER ELECTION**	PER ELECTION**
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 1,574.54	\$ 0	\$ 0 <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$ 1574.54	0 %	\$ 3,000.	\$ 3,000.00	8-16-08	8-16-08
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$	%	\$	\$		
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	\$ <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$	%	\$	\$		
SUBTOTALS \$							\$	\$ 1,574.54	\$	\$

(Enter (e) on
Schedule E, Line 3)

Schedule B Summary

- Loans received this period \$ 0
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 0
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) **NET \$** 0
Enter the net here and on the Summary Page, Column A, Line 2.
(May be a negative number)

†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

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** if required.

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

**Schedule E
 Payments Made**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

George Barich

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

- | | |
|---|---|
| MBR member communications | RAD radio airtime and production costs |
| MTG meetings and appearances | RFD returned contributions |
| OFC office expenses | SAL campaign workers' salaries |
| PET petition circulating | TEL t.v. or cable airtime and production costs |
| PHO phone banks | TRC candidate travel, lodging, and meals |
| POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| PRO professional services (legal, accounting) | VOT voter registration |
| PRT print ads | WEB information technology costs (internet, e-mail) |

NAME AND ADDRESS OF PAYEE
 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)

Healdsburg Signs
 1200 A Healdsburg Ave.
 Healdsburg, CA 95448

DESCRIPTION OF PAYMENT

Additional yard signs

CODE OR

CMP

AMOUNT PAID

538.75

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

SUBTOTAL \$ 538.75

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) \$ 538.75
- Unitemized payments made this period of under \$100 \$ 0
- Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ 0
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL \$ 538.75