

Supplemental Independent Expenditure Report

(Government Code Section 84203.5)

SEE INSTRUCTIONS ON REVERSE

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

SUPPLEMENTAL INDEPENDENT EXPENDITURE

Report covers period from <u>7-1-2008</u> through <u>9-30-2008</u> Date of election If applicable: (Month, Day, Year)	Date Stamp RECEIVED OCT - 2 2008 City <u>City of Petaluma</u>	CALIFORNIA FORM 465 Page <u>1</u> of <u>1</u> For Official Use Only
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Amendment (Explain Below)

I.D. NUMBER (If recipient committee)

1. Committee/Filer Information

COMMITTEE/FILER'S NAME

PEACE OFFICERS ASSOCIATION OF Petaluma
STREET ADDRESS (NO P.O. BOX)

[REDACTED] Petaluma Ca 94952
CITY STATE ZIP CODE AREA CODE/PHONE

T Shoemaker @ ci. PETALUMA, CA, US
OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer (If recipient committee)

NAME OF TREASURER

Tami Shoemaker
MAILING ADDRESS

[REDACTED] Petaluma Ca 94952
CITY STATE ZIP CODE AREA CODE/PHONE

[REDACTED]
OPTIONAL: FAX / E-MAIL ADDRESS

2. Name of Candidate or Measure Supported or Opposed

NAME OF CANDIDATE	OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE	CHECK ONE	
		SUPPORT	OPPOSE
NAME OF BALLOT MEASURE <u>MEASURE "K"</u>	BALLOT NO./LETTER JURISDICTION	SUPPORT	OPPOSE

3. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
<u>8/6/08</u>	<u>Petalumans For Clean Water AND Fiscal Responsibility</u>	<u>Donation to support defeat of measure K</u>	<u>\$1000.</u>	<u>\$ 1,000.00</u>
<u>09/29/08</u>	<u>" "</u>	<u>" "</u>	<u>\$2500.</u>	<u>3500.00</u>