				COVER PAGE
Recipient Committee Campaign Statement	Туре ог рг	int in ink.	RECEIVE	california form 460
Cover Page (Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period from 01/01/2012 through 03/17/2012	Date of election if applicable: (Month, Day, Year)	"12 MAR 22 P1 CITY OF CHULA VI CITY CLERK'S OF	For Official Use Only
		(0)	OH T OLLH TO OH	124.5
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committees Sponsored Small Contributor Committee	s 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) 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 Termi Amendment (Explain below	Speci Suppi State	terly Statement ial Odd-Year Report Iemental Preelection ment - Attach Form 495
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Pamela Bensoussan for City Council 2012	D. NUMBER 1299632	Treasurer(s) NAME OF TREASURER Ms. Georgie Stillman MAILING ADDRESS 580 Twin Oaks Avenue		
STREET ADDRESS (NO P.O. BOX) 580 Twin Oaks Avenue		CITY Chula Vista	STATE Z	PIP CODE AREA CODE/PHONE 91910-5613 (619) 429-0610
	DE AREA CODE/PHONE 0-5613	NAME OF ASSISTANT TREASURE	ER, IF ANY	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS		
CITY STATE ZIP COL	DE AREA CODE/PHONE	CITY	STATE Z	ZIP CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE	SS	
4. Verification I have used all reasonable diligence in preparing and reviewing this st under penalty of perjury under the laws of the State of California that to the Executed on Date Executed on Date Executed on Date	be rorgoing is true and correct. By By RV	vall Stillma Signature of Treasurer or Assistant	Treasurer Onent or Responsible Office of Sponsor	and date
Executed onDate	Ву	Signature of Controlling Officer, Candidate, Sta	ate Measure Proponent	EPPC Form 460 (January/0

Recipient Committee Campaign Statement Cover Page - Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM	460
Page2 of	20

Officeholder or Candidate Controlled Commit	tee			6.	Primarily Formed Ballot	Measure Cor	mmittee		
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE	,			
Ms. Pamela Bensoussan									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRI	CT NUMBER IF APP	LICABLE)			BALLOT NO. OR LETTER	JURISDICTIC	DN	1	
City Council Member Chula Vista - Seat 3									SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP						
616 2nd Avenue	Chula Vista	CA	91910-5936		Identify the controlling off	iceholder, car	ndidate, or state measure	proponent,	if any.
					NAME OF OFFICEHOLDER, CANI	DIDATE, OR PROF	PONENT		
Related Committees Not Included in this State	ment: List any co	nmittees							
not included in this statement that are controlled by you of contributions or make expendidtures on behalf of your car	are primarily form	ed to receive			OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER								
	I.B. NOWBEN	`							
NAME OF TREASURER	CONTROLLE YES			7.	Primarily Formed Candid	late/Officehol	der Committee	List names	of
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E					officeholder(s) or candidate(s)		mmittee is primarily formed.		_
OTTLET ADDITES (NO P.O.	(OA)				NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT OR HE	LD	SUPPORT
CITY	710 0005								OPPOSE
CITY STATE	ZIP CODE	AREA (CODE/PHONE		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT OR HE	LD	
									SUPPORT
COMMITTEE NAME	I.D. NUMBER	}			WWE 05 0 THE 1	 			OPPOSE
					NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR HE	LD	SUPPORT
NAME OF TREASURER	CONTROLLE	D COMMITTEE	?						OPPOSE
	YES	□ NO			NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR HE		
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	OX)								SUPPORT OPPOSE
CITY STATE :	IP CODE	ADELO	ODE DUOLE						
SIAIE 2	IF CODE	AREA C	CODE/PHONE						
						Attach con	tinuation sheets if necess		

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE
Statement covers period CALIFORNIA

SEE INSTRUCTIONS ON REVERSE		from 01/01/2012 through 03/17/2012	FORM 400 Page3 of20
NAME OF FILER Pamela Bensoussan for City Council 2012			1.D. NUMBER 1299632
Contributions Received	TOTAL THIS PERIOD CALI (FROM ATTACHED SCHEDULES) TOT	Running in Both General Elections	ummary for Candidates the State Primary and s
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$0.00 \$ \$10,667.00 \$0.00	\$10,667.00 \$10,667.00 \$0.00 \$10,667.00 20. Contributions Received \$ 21. Expenditures Made \$	1/1 through 6/30 7/1 to Date
Expenditures Made 6. Payments Made 7. Loans Made 8. SUBTOTAL CASH PAYMENTS 9. Accrued Expenses (Unpaid Bills) 10. Nonmonetary Adjustment 11. TOTAL EXPENDITURES MADE Schedule E, Line 3 Add Lines 6 + 7 Schedule F, Line 3 Add Lines 8 + 9 + 10	\$ \$8,867.49 \$ \$0.00 \$ \$8,867.49 \$ \$0.00 \$ \$0.00 \$ \$0.00 \$ \$8,867.49 \$	\$8,867.49 Candidates \$0.00 22. Cum	t Summary for State nulative Expenditures Made* ject to Voluntary Expenditure Limit) Total to Date

\$10,279.86

\$10,667.00

\$8,867.49

\$12,079.37

\$0.00

\$0.00

\$0.00

\$0.00

Previous Summary Page, Line 16

Add Lines 12 + 13 + 14, then subtract Line 15

Column A, Line 3 above

Column A, Line 8 above

Schedule I, Line 4

Schedule B, Part 2

See instructions on reverse

Add Line 2 + Line 9 in Column B above

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 *Ar

To calculate Column B, add

amounts in Column A to the

corresponding amounts

from Lines 2, 7, and 9 (if

any).

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

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

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

Cash Equivalents and Outstanding Debts

12. Beginning Cash Balance

14. Miscellaneous Increases to Cash

17. LOAN GUARANTEES RECEIVED

16. ENDING CASH BALANCE

13. Cash Receipts

15. Cash Payments

18. Cash Equivalents

19. Outstanding Debts

Schedule A

Type or print in ink.

Monetary	onetary Contributions Received	Amounts may be rounded			SCHEDULE A			
onotary	Contributions (Cocived		to whole dollars.	Statement cover	•	CALIFO	ORNIA	460
				Irom		FO	RM	460
SEE INSTRUCTIO	ONS ON REVERSE			through <u>03/17/</u>	2012	Page	4 of	20
NAME OF FILER						I.D. NUMBE	R	
Pamela Be	ensoussan for City Council 2012					1299632		
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 Y (JAN. 1 - DEC	D DATE 'EAR	PER ELI TO D (IF REQ	ATE
02/24/2012 Mr. Robert L Hines 3043 Guido Street Oakland, CA 94602-3518		IND COM OTH PTY SCC	Lawyer Farella Braun + Martel LLP	\$300.00	\$.00 P12
	Intermediary: CompleteCampaigns.com (Credit Card Processor) 610 Gateway Center Way Suite K San Diego, CA 92102							
01/27/2012	Rodi R. Mikha 8280 Broadway Lemon Grove, CA 91945-2006	IND COM OTH PTY	Owner Quality Towing	\$250.00	\$.	250.00	\$250.	00 P12
03/08/2012	Mr. Fred G. Ashford 10655 Portobelo Drive San Diego, CA 92124-1117	IND COM OTH PTY SCC	General Manager Republic/Allied Waste Services	\$200.00	\$2	200.00	\$200.	00 P12
			SUBTOTAL \$	750.00				
Schedule	A Summary					ntributor Cod	es	
1. Amou	nt received this period - itemized monetary contributions. de all Schedule A subtotals.)	• •		9,200.00	COM	I - Recipient (Other the	an PTY or SC	
2. Amoui	nt received this period - unitemized monetary contributions of le	ess than \$100		OTH - Other (e.g., business enti PTY - Political Party 1,467.00 SCC - Small Contributor Commi				
	monetary contributions received this period. Lines 1 and 2. Enter here and on the Summary Page, Column A	A line 1)		10,667.00				
,	and the same of th	, Line 1.)		<u> </u>			_	

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

SCHEDULE A (CONT.)

Statement covers period

Wionetary	ionetary Contributions Neceived		to whole donars.		12	FORM 460		
				through03/17/2	012 Pag	ge <u>5</u> of		
NAME OF FILER						NUMBER 99632		
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)		
03/05/2012	Mr. Michael A. Green 43 Palomar Drive Chula Vista, CA 91911-1413	IND □ COM □ OTH □ PTY □ SCC	Attorney Green & Green LLP	\$250.00	\$250.00			
02/24/2012	Mr. Randall Bone P.O. Box G Aspen, CO 81612	IND COM OTH PTY SCC	President Sunrise Co.	\$300.00	\$300	\$300.00 P12		
01/26/2012	Stephen M. Haase 1431 Pacific Highway Unit 101 San Diego, CA 92101-8318	IND COM OTH PTY SCC	Planning/Real Estate Baldwin & Sons	\$300.00	\$300	\$300.00 P12		
01/28/2012	Erin N. Ruhe 42075 Vandamere Court Temecula, CA 92592-7205	IND COM OTH PTY	Business Executive Home Fed Corporation	\$150.00	\$150	\$150.00 P12		
			SUBTOTAL	\$ 1.000.00				

* Contributor Codes

IND - Individual

COM - Recipient Committee

(Other than PTY or SCC)

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

PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars

SCHEDULE A (CONT.)

monotary	Contributions Received		to whole dollars.	Statement covers	•		FORNIA ORM	460
				through03/17/2	2012	Page _	6 of _	20
NAME OF FILER		<u>.</u>				I.D. NUM	BER	
Pamela Be	nsoussan for City Council 2012					12996	32	
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 Y (JAN. 1 - DEC	'EAR	TO	LECTION DATE QUIRED)
03/17/2012	Dr. Brian E Joseph 2339 Royal Crest Drive Escondido, CA 92025-7012	MIND COM OTH PTY SCC	veterinarian Chula Vista Nature Center	\$100.00	\$100.0		\$100	0.00 P12
	Intermediary: CompleteCampaigns.com (Credit Card Processor) 610 Gateway Center Way Suite K San Diego, CA 92102					į		
02/08/2012	Shawn Baldwin 280 Newport Center Drive Suite 240 Newport Beach, CA 92660-7548	E IND COM OTH PTY SCC	Vice President Baldwin & Sons, LLC	\$300.00	\$:	300.00	\$300	0.00 P12
03/01/2012	Ms. Lata Israni 9851 Blackgold Road La Jolla, CA 92037-1117	IND COM OTH PTY SCC	Homemaker Homemaker	\$300.00	\$3	300.00	\$300	.00 P12
						·		
			SUBTOTAL \$	700.00				

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Schedule A (Continuation Sheet)

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

Monetary (Monetary Contributions Received		to whole dollars.		12	california form 460		
				through <u>03/17/2</u>	012 P	age	20	
NAME OF FILER						D. NUMBER		
Pamela Bei	nsoussan for City Council 2012				1	299632		
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 DA CALENDAR YEA (JAN. 1 - DEC. 31	R TC	DATE QUIRED)	
01/27/2012	Mr. Lance Waite PO Box 7218 Rancho Santa Fe, CA 92067-7218	IND COM OTH PTY	Real Estate Development Integral	\$300.00	\$30	\$30	0.00 P12	
03/08/2012	Ms. Varsha Israni 4655 Rancho Verde Trail San Diego, CA 92130-5236	IND COM OTH PTY SCC	Homemaker Homemaker	\$300.00	\$30	\$300.00		
03/08/2012	Mr. Steven L. Miesen 2025 Chardonnay Terrace Chula Vista, CA 91913-1316	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Division Manager Allied Waste Services	\$200.00	\$20	\$20	00.00 P12	
03/07/2012	Thomas F. Geselbracht 203 N La Salle Street Suite 1800 Chicago, IL 60601-1264	IND □ COM □ OTH □ PTY □ SCC	attorney DLA Piper LLP	\$300.00	\$30	\$30	00.00 P12	
			SUBTOTAL	\$ 1.100.00	1			

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary	Contributions Received		to whole dollars.	Statement covers	012		ORNIA ORM	460
				through <u>03/17/2</u>	2012	Page _	8 of _	20
NAME OF FILER						I.D. NUME	BER	
Pamela Be	nsoussan for City Council 2012					129963	32	
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 Y (JAN. 1 - DEC	'EAR	TO	LECTION DATE QUIRED)
03/08/2012	Mr. Dick F. Chase Jr. 3730 Valley Vista Road Bonita, CA 91902-1125	IND COM OTH PTY SCC	Consultant Scott,Andy, Max, Inc.	\$200.00	\$	200.00	\$200).00 P12
01/27/2012	Suzanne E. Scarborough 5166 Whitman Way Apt. 306 Carlsbad, CA 92008-4647	IND COM OTH PTY	land developer Land Forward CA Inc	\$300.00	\$.	300.00	\$300	0.00 P12
01/27/2012	Hale Yahyapour 6827 Helenite Place Carlsbad, CA 92009-1731	ind □ com □ oth □ pty □ scc	marketing Home Fed Corporation	\$300.00	\$300.00		\$300	.00 P12
03/15/2012	Mr. James E. Biddle 220 Davidson Street Chula Vista, CA 91910-2705	IND COM OTH PTY	Owner The Securities Center, Inc.	\$250.00	\$2	250.00	\$250	.00 P12
			SUBTOTAL \$	1.050.00				
			SOBIOTAL \$	1,050.00				

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PTY - Political Party

(Continuation Sheet) Schedule A

Type or print in ink.

SCHEDULE A (CONT.)

	onetary Contributions Received		Amounts may be rounded to whole dollars.		4.0	IFORNIA 460
				through03/17/2	012 Page	9 of20
NAME OF FILER	nsoussan for City Council 2012				I.D. NU 1299	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE * 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)
	Intermediary: CompleteCampaigns.com (Credit Card Processor) 610 Gateway Center Way Suite K San Diego, CA 92102					
02/09/2012	Mr. Alfred E. Baldwin 280 Newport Center Drive Suite 240 Newport Beach, CA 92660-7548	IND COM OTH PTY	Homebuilder Baldwin & Sons	\$300.00	\$300.0	\$300.00 P12
02/11/2012	David J. Lappin 1571 Wishing Star Drive Chula Vista, CA 91915-1824	IND COM OTH PTY	Locomotive Engineer Amtrak	\$100.00	\$100.0	\$100.00 P12
03/08/2012	Mr. James T. Ambroso 14371 Silver Heights Road Poway, CA 92064-4971	IND COM OTH PTY	Southern California Area President Allied Waste Services	\$300.00	\$300.0	\$300.00 P12
			SUBTOTAL	\$ 700.00		

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Wionetary	Contributions Received		to whole dollars.	from01/01/20	•		FORNIA 460				
				through <u>03/17/2</u>	2012	Page _	10 of20				
NAME OF FILER						I.D. NUME	BER				
Pamela Be	ensoussan for City Council 2012					129963	32				
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 Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)				
02/07/2012	Alan C. Campbell 2746 29th Street San Diego, CA 92104-4909	MIND COM OTH PTY SCC	architect self employed	\$300.00	\$300.00		\$300.00		300.00 \$300.		\$300.00 P12
01/29/2012	Sandra K. Duncan 262 2nd Avenue Chula Vista, CA 91910-2940	IND COM OTH PTY	Retired Retired	\$100.00	\$	100.00	\$150.00 P12				
01/19/2012	Ms. Norma Hernandez 5409 Central Avenue Bonita, CA 91902-2707		Retired Retired	\$300.00	\$300.00		\$300.00		\$300.00 P12		
02/09/2012	Ms. Deeann Baldwin 280 Newport Center Drive Suite 240 Newport Beach, CA 92660-7548	IND COM OTH PTY SCC	Housewife Housewife	\$300.00	\$:	300.00	\$300.00 P12				
			SUBTOTAL \$	1,000.00							

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SCHEDULE A (CONT.)

Monetary (Monetary Contributions Received		to whole dollars.		12	CALIFORNIA FORM		460				
					012	Page	11 of	20				
NAME OF FILER						I.D. NUMBER	2					
Pamela Bei	nsoussan for City Council 2012					1299632						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *			CUMULATIVE TO I CALENDAR YEA (JAN: 1 - DEC: 3	AR	PER ELE TO D/ (IF REQU	ATE				
02/24/2012	Mr. John A. Willett 97 Montebello Street Chula Vista, CA 91910-3017	IND COM OTH PTY SCC	Retired Retired	\$250.00	\$250.00		\$250.00		\$250.00		\$250.	00 P12
01/27/2012	Mr. John S. Moot Esq. 785 River Rock Road Chula Vista, CA 91914-2431	₩ IND □ COM □ OTH □ PTY □ SCC	Attorney Swhartz Somedjian	\$100.00	\$100.00		\$100	00 P12				
01/30/2012	Robert D Shoecraft 4532 Vereda Mar de Ponderosa San Diego, CA 92130	IND COM OTH PTY	attorney Shoecraft & Burton LLP	\$300.00	\$300.00		\$300	.00 P12				
01/14/2012	Mr. Deepak M. Israni 4655 Rancho Verde Trail San Diego, CA 92130-5236	IND COM OTH PTY SCC	President Pacifica Companies	\$300.00	\$3	300.00	\$300	.00 P12				
			SURTOTAL	s 950.00	<u> </u>	·						

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

				from01/01/20	012	FORM	
				through03/17/2	2012	Page	12 of20
NAME OF FILER				L	1	I.D. NUMBER	
Pamela Be	nsoussan for City Council 2012				1	1299632	
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 D CALENDAR YEA (JAN. 1 - DEC. 3	AR .	PER ELECTION TO DATE (IF REQUIRED)
01/27/2012	Ms. Cheryl S. Cox 647 Windsor Circle Chula Vista, CA 91910-6233	MIND COM OTH PTY SCC	Mayor City of Chula Vista	\$100.00	\$10	00.00	\$100.00 P12
01/27/2012	Ms. Janet Mazzarella 3421 Via Mandril Bonita, CA 91902-1239	IND COM OTH PTY SCC	Educator Southwestern College	\$100.00	\$10	00.00	\$100.00 P12
02/23/2012	Ms. Veronica E. Burton 826 Caminito Estrella Chula Vista, CA 91910-7869	IND □ COM □ OTH □ PTY □ SCC	Counselor Southwestern College	\$100.00	\$10	00.00	\$100.00 P12
03/17/2012	Ms. Susan Fuller 1140 Seacoast Drive Imperial Beach, CA 91932-3102	IND COM OTH PTY SCC	Retired Retired	\$300.00	\$30	0.00	\$300.00 P12
			SUBTOTAL \$	600.00			

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Schedule A (Continuation Sheet)

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

Monetary (Contributions Received	1	to whole dollars.	Statement covers	-	CALIFO FOR		460
				through03/17/	2012	Page	13 of	20
NAME OF FILER						I.D. NUMBER	}	
	nsoussan for City Council 2012					1299632	-	
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 YI (JAN. 1 - DEC.	EAR	PER ELE TO D. (IF REQI	ATE
01/27/2012	Bob Penner 5330 La Jolla Boulevard La Jolla, CA 92037-7916	IND COM OTH PTY	Senior Financial Anayst Home Fed Corporation	\$300.00	\$:	300.00	\$300	.00 P12
03/01/2012	Mr. Frank J Carson 50 E Sierra Way Chula Vista, CA 91911-1512	IND COM OTH PTY SCC	Recreation Supervisor City of Chula Vista	\$100.00	\$	100.00	\$100	.00 P12
	Intermediary: CompleteCampaigns.com (Credit Card Processor) 610 Gateway Center Way Suite K San Diego, CA 92102							
01/28/2012	Debra M. Dodson 4209 Huerfano Avenue San Diego, CA 92117-4309	IND COM OTH SCC	Business Owner Self Employed	\$300.00	\$	300.00	\$300	0.00 P12
			SUBTOTAL	\$ 700.00				
			SUBTOTAL	φ /UU.UL	, i			

* Contributor Codes

IND - Individual

COM - Recipient Committee

(Other than PTY or SCC)

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

PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

				from01/01/20	012	FORM 460
				through03/17/2	2012 Pa	age14 of20
Pamela Be	ensoussan for City Council 2012				I	NUMBER 299632
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 DA CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE
01/27/2012	Jeff O'Connor 17520 Frondoso Drive San Diego, CA 92128-1315	MIND COM OTH PTY SCC	Director of Operations Home Fed Corporation	\$150.00	\$150	\$150.00 P12
01/27/2012	Nora E. Vargas 1284 El Cortez Court Chula Vista, CA 91910-8186	END COM OTH PTY SCC	VP Community Engagement Planned Parenthood	\$100.00	\$100	.00 \$100.00 P12
01/27/2012	Mr. Paul J. Borden 655 6th Avenue Unit 718 San Diego, CA 92101-8965	E IND COM OTH PTY SCC	Business Executive HomeFed Corporation	\$300.00	\$300	\$300.00 P12
01/29/2012	Katarzyna Lappin 1571 Wishing Star Drive Chula Vista, CA 91915-1824	IND COM OTH PTY SCC	artist self employed	\$100.00	\$100	\$100.00 P12
				T		-
			SUBTOTAL \$	650.00		

* Contributor Codes

IND - Individual

COM - Recipient Committee

(Other than PTY or SCC)

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

PTY - Political Party

Schedule E	An	Type or print i					SCHEDULE E	
Payments Made	All	to whole dol		Stat	ement covers period	CALI	FORNIA 400	ı
·				from .	01/01/2012		orm 460	ı
				through	03/17/2012	Page .	15 of20	
SEE INSTRUCTIONS ON REVERSE						I.D. NUM	DED	\dashv
NAME OF FILER								
Pamela Bensoussan for City Council 2012			·····			12996	032	
CODES: If one of the following codes accurately describes the p	ayment, you may	enter the co	de. Otherwise, des	cribe the	e payment.			
CMP campaign paraphernalia/misc. 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)* LEG legal defense LIT campaign literature and mailings	OFC office expens PET petition circul PHO phone banks POL polling and so POS postage, deliv	d appearances sese lating	-	RAD RFD SAL TEL TRC TRS TSF VOT WEB	radio airtime and production cost returned contributions campaigns workers'salaries t.v. or cable airtime and productic candidate travel, lodging, and me staff/spouse travel, lodging, and it transfer between committees of t voter registration information technology costs (interpretation)	on costs eals meals the same c		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR	DESCRIPTIO	ON OF PAYMENT		AMOUNT PAID	
Aristotle International, Inc 205 Pennsylvania Avenue SE Washington, DC 20003-1164		ОТН	cc processing fee	es			\$15.0	0
Trader Joe's 1090 University Avenue San Diego, CA 92103-7307		FND					\$135.7	'1

Aristotle International, Inc 205 Pennsylvania Avenue SE Washington, DC 20003-1164	ОТН	cc processing ree		\$7.45
* Payments that are contributions or independent expenditures must also be summarized	d on Schedule D.		SUBTOTAL \$	158.16
Schedule E Summary				8,819.99
Itemized payments made this period. (Include all Schedule E Subotals.)				
				47.50
2. Unitemized payments made this period of under \$100			\$	47.50 0.00

TOTAL \$_

8,867.49

4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)

Type or print in ink.

(Continuation Sheet)		Amounts may be rounded			SCHE	EDULE E (CONT
Payments Made		to whole dollars.	Statemen	01/01/2012	CALIFORNIA FORM	460
SEE INSTRUCTIONS ON REVERSE			through —	03/17/2012 P	age <u>16</u> o	f20
NAME OF FILER				15	D. NUMBER	
Pamela Bensoussan for City Council 2012				l	299632	
CODES: If one of the following codes accurately describes	the payment, you ma	v enter the code. Otherwise	e describe the pay			
CMP campaign paraphernalia/misc. 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)* LEG legal defense LIT campaign literature and mailings	MBR member co MTG meetings at OFC office expet PET petition circ PHO phone bank POL polling and POS postage, de	mmunications nd appearances nsese rulating	RAD radio RFD return SAL camp TEL t.v. or TRC candi TRS staff/s TSF transf VOT voter	airtime and production costs ned contributions aigns workers'salaries aigns workers'salaries cable airtime and production co date travel, lodging, and meals pouse travel, lodging, and meals er between committees of the sa registration lation technology costs (internet,	s ame candidate/spoi	nsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF F	PAYMENT	AMC	OUNT PAID
Ramona Gonzalez 225 Palomar Street Apt. 24 Chula Vista, CA 91911-4210		FND				\$150.00
G-Force 3315 Juanita Street San Diego, CA 92105-3809		CNS				\$218.75
Complete Campaigns 3635 Ruffin Road Floor 3 San Diego, CA 92123-1880		WEB				\$300.00
Payments that are contributions or independent expenditures must al	so be summarized on Sch	edule D.		SUBTOTA	AL\$	668.75

Type or print in ink.

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(Continuation Sheet)		nay be rounded ole dollars.	Statemer	nt covers period	CALIFORNI	A 400
Payments Made			from	01/01/2012	FORM	460
SEE INSTRUCTIONS ON REVERSE			through —	03/17/2012	Page1	7 of20
NAME OF FILER					I.D. NUMBER	
Pamela Bensoussan for City Council 2012					1299632	
CODES: If one of the following codes accurately describes the	e payment, you may enter	the code. Otherwise	e, describe the pay	ment.		
CMP campaign paraphernalia/misc. 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)* LEG legal defense LIT campaign literature and mailings	MBR member communication MTG meetings and appears OFC office expensese PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads	earch messenger services	RFD retur SAL cam TEL t.v. c TRC canc TRS staff. TSF trans VOT vote	o airtime and production co ned contributions paigns workers'salaries or cable airtime and produc lidate travel, lodging, and n /spouse travel, lodging, and sfer between committees or r registration mation technology costs (ii	ction costs neals d meals f the same candidate/	/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	COD	E OR	DESCRIPTION OF	PAYMENT		AMOUNT PAID
Innovation Media Group 22 W 35th Street Suite 205 National City, CA 91950-7927	CN	S				\$2,000.00
Innovation Media Group 22 W 35th Street Suite 205 National City, CA 91950-7927	CN	IS				\$2,000.00
Aristotle International, Inc 205 Pennsylvania Avenue SE Washington, DC 20003-1164	OT	Cc processi	ngfee			\$1.75

SUBTOTAL \$ 4,001.75 * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule F

Type or print in ink

SCHEDULE E (CONT.)	E E (CONT.)
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(Continuation Sheet)	Amounts may b					SCHED	ULE E (CONT
Payments Made	to whole do	ollars.	State	ement covers period 01/01/2	012 CAI	LIFORNIA FORM	460
SEE INSTRUCTIONS ON REVERSE			through	03/17/2	012 Page	18_of _	20
NAME OF FILER					I.D. NU	JMBER	
Pamela Bensoussan for City Council 2012					1299	9632	
CODES: If one of the following codes accurately describes the payment, you may	v enter the c	ode Otherwise des	cribe the	navment			
CMP campaign paraphernalia/misc. MBR member con meetings an contribution (explain nonmonetary)* OFC civic donations PET petition circuption (and a filing/ballot fees pentrum fundraising events pelling and sportage, deligned independent expenditure supporting/opposing others (explain)* MBR member con meetings an office expensions and office expensions petition circuption circuption circuption independent expenditure supporting/opposing others (explain)* POS postage, deligned in the first period of the	mmunications ad appearances sese ulating	nger services	RAD RFD SAL TEL TRC TRS TSF	radio airtime and prod returned contributions campaigns workers'sa t.v. or cable airtime an candidate travel, lodgi staff/spouse travel, loc transfer between comi voter registration information technology	alaries of production costs ng, and meals dging, and meals mittees of the same		or .
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR [DESCRIPTION	OF PAYMENT		AMOUN	IT PAID
Aristotle International, Inc 205 Pennsylvania Avenue SE Washington, DC 20003-1164	ОТН	cc processing fee	s				\$45.00
Alejandro Guillen alex-guillen.music@gmail.com Chula Vista, CA 91910	FND						\$150.00
Innovation Media Group 22 W 35th Street Suite 205 National City, CA 91950-7927	FND						\$252.53

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

447.53

SUBTOTAL \$

Type or print in ink. Amounts may be rounded

SCHEDULE E (CONT	.)	
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(Continuation Sheet) Payments Made	Am	nounts may be ro to whole dollar		State	ement covers period 01/01/2012		ORNIA	460
SEE INSTRUCTIONS ON REVERSE				through	03/17/2012	Page _	<u>19</u> of	20_
NAME OF FILER						I.D. NUMI		
Pamela Bensoussan for City Council 2012						12996	32	
CMP campaign paraphernalia/misc.	ent, you may R member come G meetings and	munications	e. Otherwise, des	RFD	returned contributions	sts		
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)* LEG legal defense LIT campaign literature and mailings	C office expens T petition circul D phone banks D polling and su S postage, deliv O professional	sese lating		TEL TRC TRS TSF VOT	campaigns workers'salaries t.v. or cable airtime and produc candidate travel, lodging, and staff/spouse travel, lodging, an transfer between committees o voter registration information technology costs (i	neals d meals f the same c		nsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE OR		DESCRIPTIO	ON OF PAYMENT		AMC	OUNT PAID
City of Chula Vista 276 4th Avenue Chula Vista, CA 91910-2631		FIL						\$1,100.00
Costco Wholesale 460 Rancho Del Rey Chula Vista, CA 91910		FND						\$252.55
Innovation Media Group 22 W 35th Street Suite 205 National City, CA 91950-7927		CNS						\$2,000.00
* Payments that are contributions or independent expenditures must also be sun	nmarized on Sch	hedule D.			s	UBTOTAL	\$	3,352.55

Type or print in ink.

NT.)

(Continuation Sheet)	Amounts may be rounded		SCHEDULE E (CON	
Payments Made	to whole dollars.	Statement covers period from 01/01/2012	CALIFORNIA FORM 460	
SEE INSTRUCTIONS ON REVERSE		through 03/17/2012 Page	20 of20	
NAME OF FILER				
Pamela Bensoussan for City Council 2012			UMBER	
CODES: If one of the following codes accurately describes the payme	ent, you may enter the code. Othonwise	describe the new 1	9632	
CMP campaign paraphernalia/misc. 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)* LEG legal defense LIT campaign literature and mailings MB MB MB MB MB PET PET PET PET PET POS PRET PRET	member communications meetings and appearances office expensese petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting)	RAD radio airtime and production costs RFD returned contributions SAL campaigns workers'salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same VOT voter registration WEB information technology costs (internet, e-r		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID	
Aristotle International, Inc 205 Pennsylvania Avenue SE Washington, DC 20003-1164	OTH cc processing	fee	\$15.00	
G-Force 3315 Juanita Street San Diego, CA 92105-3809	WEB		\$131.25	
Aristotle International, Inc 205 Pennsylvania Avenue SE Washington, DC 20003-1164	OFC		\$45.00	

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

191.25

SUBTOTAL \$