Supplemental Independent Expenditure Report
(Government Code Section 84203.5)

SEE INSTRUCTIONS ON REVERSE

1. Committee/Filer Information

<table>
<thead>
<tr>
<th>I.D. NUMBER (if recipient committee)</th>
<th>1319901</th>
</tr>
</thead>
</table>

Independent Expenditures Made Amended

1. Committee/Filer Information

Felipe Fuentes Reform California Ballot Measure Committee

<table>
<thead>
<tr>
<th>STREET ADDRESS (NO P.O. BOX)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>CITY</td>
<td>CA</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>CA</td>
</tr>
</tbody>
</table>

2. Name of Candidate or Measure Supported or Opposed

<table>
<thead>
<tr>
<th>NAME OF CANDIDATE</th>
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</tr>
</thead>
<tbody>
<tr>
<td>NAME OF BALLOT MEASURE</td>
<td></td>
</tr>
</tbody>
</table>

LAUSD Election Date Alignment Charter Amendment

3. Independent Expenditures Made

<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>DESCRIPTION OF EXPENDITURE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/25/2015</td>
<td>Automated Mailers Lake Forest, CA 92630</td>
<td>LIT</td>
<td>$1,551.72</td>
</tr>
<tr>
<td>02/25/2015</td>
<td>Continental Colorcraft Monterey Park, CA 91754</td>
<td>LIT</td>
<td>$2,405.40</td>
</tr>
<tr>
<td>02/25/2015</td>
<td>US Postmaster Los Angeles, CA 90017</td>
<td>POS</td>
<td>$5,324.14</td>
</tr>
</tbody>
</table>

Report covers period from 01/01/2015 through 02/25/2015

Date of election if applicable: 03/03/2015

Treasurer (if recipient committee)

Felipe Fuentes

MAILING ADDRESS

Los Angeles, CA 90017 (213) 452-6565

Footnotes:

FPPC Form 465 (June/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>DESCRIPTION OF EXPENDITURE</th>
<th>AMOUNT</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
</tr>
</thead>
</table>
| 02/25/2015 | Roy Aguilera  
Sun Valley, CA 91352 | CNS                          | $554.63  | $10,646.26                                        |
| 02/25/2015 | Marco Meneghin  
Los Angeles, CA 90039 | CNS                          | $554.63  | $10,646.26                                        |
| 02/25/2015 | Political Data, Inc.  
Burbank, CA 91506 | Voter Data                  | $255.74  | $10,646.26                                        |
Supplemental Independent Expenditure Report

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Felipe Fuentes Reform California Ballot Measure Committee

4. Summary
1. Total independent expenditures of $100 or more made this period. (Part 3.) $10,646.26
2. Total independent expenditures under $100 made this period. (Not itemized.) $0.00
3. Total independent expenditures made this period (Add Lines 1 + 2.) TOTAL $10,646.26

5. Filing Officers Enter the name and address of each filing officer with whom the filer's most recent campaign statements (Form 450, 460 or 461) have been filed.

1) NAME OF FILING OFFICER
Secretary of State
ADDRESS (NO. AND STREET)
CITY Sacramento
STATE CA ZIP CODE 95814

2) NAME OF FILING OFFICER
ADDRESS (NO. AND STREET)
CITY
STATE ZIP CODE

3) NAME OF FILING OFFICER
ADDRESS (NO. AND STREET)
CITY
STATE ZIP CODE

6. Verification
I certify that the "independent expenditure(s)" disbursements reported above as those terms are defined in Government Code 81002, the Summary statement and to the best of my knowledge the information provided in the foregoing is true and correct.

Executed on 04/01/2015
DATE

Executed on 04/01/2015
DATE

Executed on
DATE

EXECUTED ON
DATE

FPPC Form 465 (June/09)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-3772)
Supplemental Independent Expenditure Report
(Government Code Section 84203.5)

SEE INSTRUCTIONS ON REVERSE

1. Committee/Filer Information
   I.D. NUMBER (If recipient committee)
   1319901

   COMMITTEE/FILER'S NAME
   Felipe Fuentes Reform California Ballot Measure Committee

   STREET ADDRESS (NO P.O. BOX)
   Los Angeles, CA 90017

   CITY STATE ZIP CODE AREA CODE/PHONE
   Los Angeles CA 90017 (213) 452-6565

   OPTIONAL: FAX/E-MAIL ADDRESS
   (213) 452-6575 apalaski@kaufmanlegalgroup.com

2. Name of Candidate or Measure Supported or Opposed

   NAME OF CANDIDATE
   
   NAME OF BALLOT MEASURE
   City of Los Angeles Election Date Alignment Charter Amendment

   BALLOT NO./LETTER JURISDICTION
   01 City of Los Angeles

3. Independent Expenditures Made

   DATE NAME AND ADDRESS OF PAYEE DESCRIPTION OF EXPENDITURE AMOUNT CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
   02/25/2015 Automated Mailers Lake Forest, CA 92630 LIT $1,551.72 $10,646.21
   02/25/2015 Continental Colorcraft Monterey Park, CA 91754 LIT $2,405.39 $10,646.21
   02/25/2015 US Postmaster Los Angeles, CA 90017 POS $5,324.13 $10,646.21
### 3. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>DESCRIPTION OF EXPENDITURE</th>
<th>AMOUNT</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/25/2015</td>
<td>Roy Aguilera</td>
<td>CNS</td>
<td>$554.62</td>
<td>$10,646.21</td>
</tr>
<tr>
<td></td>
<td>Sun Valley, CA 91352</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>02/25/2015</td>
<td>Marco Meneghin</td>
<td>CNS</td>
<td>$554.62</td>
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<td></td>
<td>Los Angeles, CA 90039</td>
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<td></td>
<td></td>
</tr>
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<td>Voter Data</td>
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<td>$10,646.21</td>
</tr>
<tr>
<td></td>
<td>Burbank, CA 91506</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Supplemental Independent Expenditure Report

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Felipe Fuentes Reform California Ballot Measure Committee

4. Summary

1. Total independent expenditures of $100 or more made this period. (Part 3.) $10,646.21
2. Total independent expenditures under $100 made this period. (Not itemized.) $0.00
3. Total independent expenditures made this period (Add Lines 1 + 2.) TOTAL $10,646.21

5. Filing Officers Enter the name and address of each filing officer with whom the filer's most recent campaign statements (Form 450, 460 or 461) have been filed.

1) NAME OF FILING OFFICER
Secretary of State
ADDRESS (NO. AND STREET)
CITY Sacramento
STATE CA
ZIP CODE 95814

2) NAME OF FILING OFFICER
ADDRESS (NO. AND STREET)
CITY
STATE
ZIP CODE

3) NAME OF FILING OFFICER
ADDRESS (NO. AND STREET)
CITY
STATE
ZIP CODE

4) NAME OF FILING OFFICER
ADDRESS (NO. AND STREET)
CITY
STATE
ZIP CODE

6. Verification

I certify that the "independent expenditure(s)" data as those terms are defined in Government Code section 89403 as to the best of my knowledge the foregoing is true and correct.

Executed on 04/01/2015

SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF SPONSOR

Executed on 04/01/2015

FPPC Form 465 (June/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. Committee/Filer Information

<table>
<thead>
<tr>
<th>I.D. NUMBER (If recipient committee)</th>
<th>1319901</th>
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</thead>
<tbody>
<tr>
<td>COMMITTEE/FILER'S NAME</td>
<td>Felipe Fuentes Reform California Ballot Measure Committee</td>
</tr>
<tr>
<td>STREET ADDRESS (NO P.O. BOX)</td>
<td></td>
</tr>
<tr>
<td>CITY</td>
<td></td>
</tr>
<tr>
<td>STATE</td>
<td></td>
</tr>
<tr>
<td>ZIP CODE</td>
<td></td>
</tr>
<tr>
<td>AREA CODE/PHONE</td>
<td></td>
</tr>
<tr>
<td>Los Angeles CA 90017</td>
<td></td>
</tr>
</tbody>
</table>

Treasurer (If recipient committee)

| NAME OF TREASURER                    | Felipe Fuentes |
| MAILING ADDRESS                      | | |
| CITY                                | Los Angeles |
| STATE                               | CA |
| ZIP CODE                            | 90017 |
| AREA CODE/PHONE                      | (213) 452-6565 |

2. Name of Candidate or Measure Supported or Opposed

<table>
<thead>
<tr>
<th>NAME OF CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE</th>
<th>CHECK ONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF BALLOT MEASURE</td>
<td>BALLOT NO./LETTER</td>
<td>JURISDICTION</td>
</tr>
<tr>
<td>LAUSD Election Date Alignment Charter Amendment</td>
<td>02</td>
<td>LAUSD</td>
</tr>
</tbody>
</table>

3. Independent Expenditures Made

<table>
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FPPC Form 465 (June/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### 3. Independent Expenditures Made

- **Attach additional information on appropriately labeled continuation sheets.**

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| 02/25/2015| Roy Aguilera  
Sun Valley, CA 91352         | CNS                         | $554.63  | $10,390.52                                    |
| 02/25/2015| Marco Meneghin  
Los Angeles, CA 90039        | CNS                         | $554.63  | $10,390.52                                    |
Supplemental Independent Expenditure Report

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Felipe Fuentes Reform California Ballot Measure Committee

4. Summary

1. Total independent expenditures of $100 or more made this period. (Part 3.) ........................................... $ 10,390.52
2. Total independent expenditures under $100 made this period. (Not itemized.) ........................................... $ 0.00
3. Total independent expenditures made this period (Add Lines 1 + 2.) ........................................................... TOTAL $ 10,390.52

5. Filing Officers  Enter the name and address of each filing officer with whom the filer's most recent campaign statements (Form 450, 460 or 461) have been filed.

1) NAME OF FILING OFFICER
Secretary of State
ADDRESS (NO. AND STREET)
CITY SACRAMENTO STATE CA ZIP CODE 95814

2) NAME OF FILING OFFICER
ADDRESS (NO. AND STREET)
CITY STATE ZIP CODE

3) NAME OF FILING OFFICER
ADDRESS (NO. AND STREET)
CITY STATE ZIP CODE

4) NAME OF FILING OFFICER
ADDRESS (NO. AND STREET)
CITY STATE ZIP CODE

6. Verification

I certify that the "independent expenditure(s)" disclosed in this statement were not "made at the behest of" the candidate or committee that benefitted from the expenditure(s) as those terms are defined in Government Code Section 82031 and FPPC Regulation 18225.7. I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein 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 02/27/2015 DATE

Signed By

EXECUTIVE DIRECTOR, TREASURER OR ASSISTANT TREASURER

EXECUTED ON DATE

FPPC Form 465 (June/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
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.

Amendment (Explain Below)

1. Committee/Filer Information
   I.D. NUMBER (If recipient committee)
   1319901
   COMMITTEE/FILER'S NAME
   Felipe Fuentes Reform California Ballot Measure Committee
   STREET ADDRESS (NO P.O. BOX)
   CITY STATE ZIP CODE
   Los Angeles CA 90017
   OPTIONAL: FAX / E-MAIL ADDRESS
   (213) 452-6565 apalaski@kaufmanlegalgroup.com

2. Name of Candidate or Measure Supported or Opposed
   NAME OF CANDIDATE
   NAME OF BALLOT MEASURE
   City of Los Angeles Election Date Alignment Charter Amendment

3. Independent Expenditures Made
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   Lake Forest, CA 92630
   02/25/2015 Continental Colorcraft LIT $2,405.39 $10,390.48
   Monterey Park, CA 91754
   02/25/2015 US Postmaster POS $5,324.13 $10,390.48
   Los Angeles, CA 90017

Report covers period from 01/01/2015 through 02/25/2015

Date of election if applicable: City of Los Angeles

Treasurer (If recipient committee)
NAME OF TREASURER
Felipe Fuentes
MAILING ADDRESS
CITY STATE ZIP CODE
Los Angeles CA 90017
OPTIONAL: FAX / E-MAIL ADDRESS
(213) 452-6565 apalaski@kaufmanlegalgroup.com

CHECK ONE SUPPORT OR OPPOSE

BALLOT NO./LETTER JURISDICTION SUPPORT OPPOSE
01 City of Los Angeles

For Official Use Only

FPPC Form 465 (June/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### 3. Independent Expenditures Made

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<td>Marco Meneghin Los Angeles, CA 90039</td>
<td>CNS</td>
<td>$554.62</td>
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Supplemental Independent Expenditure Report

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Felipe Fuentes Reform California Ballot Measure Committee

4. Summary

1. Total independent expenditures of $100 or more made this period. (Part 3.) $10,390.48
2. Total independent expenditures under $100 made this period. (Not itemized.) $0.00
3. Total independent expenditures made this period (Add Lines 1 + 2.) $10,390.48
4. TOTAL

5. Filing Officers
1) NAME OF FILING OFFICER
   Secretary of State
   ADDRESS
   City
   State
   ZIP Code

2) NAME OF FILING OFFICER
   ADDRESS
   City
   State
   ZIP Code

3) NAME OF FILING OFFICER
   ADDRESS
   City
   State
   ZIP Code

4) NAME OF FILING OFFICER
   ADDRESS
   City
   State
   ZIP Code

6. Verification
I certify that the "independent expenditure(s)" described as those terms are defined in Government Code are reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the foregoing is true and correct.

Executed on 02/27/2015

EXECUTED ON 02/27/2015

SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, STATE MEASURE PROONENT