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 3)
   - General Purpose Committee
     - Sponsored
     - Small Contributor Committee
     - Political Party/Central Committee
   - 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 Termination)
   - Amendment (Explain below)
   - Quarterly Statement
   - Special Odd-Year Report
   - Supplemental Preelection Statement - Attach Form 495

3. Committee Information
   I.D. NUMBER: 1338122
   COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE):
   Carmen Trutanich For District Attorney 2012
   STREET ADDRESS (NO P.O. BOX):
   CITY: Sacramento, CA
   STATE: CA
   ZIP CODE: 95841
   AREA CODE/PHONE: 916-348-9100
   MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX:
   CITY: Sacramento, CA
   STATE: CA
   ZIP CODE: 95841
   AREA CODE/PHONE: 916-348-9100
   OPTIONAL: FAX / E-MAIL ADDRESS
   916-348-9111

4. Verification
   I have used all reasonable diligence in preparing and reviewing this statement and to the
   best of my knowledge, the information and 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.

   Executed on 01/24/2013

   By

   Executed on 01/24/2013

   By

   Executed on

   By

   Executed on

   By

   Signature of Controlling Officer, Candidate, State Measure Proponent

   Signature of Controlling Officer, Candidate, State Measure Proponent

   Signature of Controlling Officer, Candidate, State Measure Proponent

   Signature of Controlling Officer, Candidate, State Measure Proponent

   FPPC Form 460 (January/05)
   FPPC Toll-Free Helpline: 800/ASK-FPPC (866/275-3772)
   State of California
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>Carmen Trutanich</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td>District Attorney</td>
</tr>
<tr>
<td></td>
<td>Los Angeles County</td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</td>
<td>City</td>
</tr>
<tr>
<td>Sacramento</td>
<td>CA</td>
</tr>
</tbody>
</table>

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trutanich Office Holder</td>
<td>1361975</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF TREASURER</th>
<th>CONTROLLED COMMITTEE?</th>
<th>X</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rin Copeland</td>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE/PHONE</th>
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<tbody>
<tr>
<td>Sacramento</td>
<td>CA</td>
<td>95841</td>
<td>916-348-9100</td>
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6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
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<table>
<thead>
<tr>
<th>BALLOT NO. OR LETTER</th>
<th>JURISDICTION</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
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<tbody>
<tr>
<td></td>
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</tbody>
</table>

Identify the controlling officeholder, candidate, or state measure proponent, if any.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER, CANDIDATE, OR PROPOSER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>OFFICE SOUGHT OR HELD</th>
<th>DISTRICT NO. IF ANY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
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<th>OFFICE SOUGHT OR HELD</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Attach continuation sheets if necessary

www.netfile.com
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Carmen Trutanich

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
District Attorney
Los Angeles County

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
Sacramento, CA 95841

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME
Trutanich Legal Defense Fund
I.D. NUMBER
1353791

NAME OF TREASURER
Rita Copeland
CONTROLLED COMMITTEE?
X YES NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)
CITY STATE ZIP CODE AREA CODE/PHONE
Sacramento, CA 95841 916-348-9100

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION SUPPORT OPPOSE

identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROONENT

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT OPPOSE

Attach continuation sheets if necessary

www.netfile.com
### Contributions Received

1. Monetary Contributions .................................. Schedule A, Line 3 $ 0.00 $ 0.00
2. Loans Received ............................................... Schedule B, Line 3 $ 0.00 $ 0.00
3. SUBTOTAL CASH CONTRIBUTIONS ...................... Add Lines 1 + 2 $ 0.00 $ 0.00
4. Nonmonetary Contributions ................................ Schedule C, Line 3 $ 0.00 $ 0.00
5. TOTAL CONTRIBUTIONS RECEIVED ..................... Add Lines 3 + 4 $ 0.00 $ 0.00

### Expenditures Made

6. Payments Made ............................................ Schedule F, Line 4 $ 502.08 $ 502.08
7. Loans Made .................................................. Schedule H, Line 3 $ 0.00 $ 0.00
8. SUBTOTAL CASH PAYMENTS .............................. Add Lines 5 + 6 $ 502.08 $ 502.08
9. Accrued Expenses (Unpaid Bills) ....................... Schedule F, Line 3 $ -472.08 $ 112,000.00
10. Nonmonetary Adjustment ................................ Schedule C, Line 3 $ 0.00 $ 0.00
11. TOTAL EXPENDITURES MADE ......................... Add Lines 8 + 9 + 10 $ 50.00 $ 112,502.08

### Current Cash Statement

12. Beginning Cash Balance ................................. Previous Summary Page, Line 16 $ 1,844.96
13. Cash Receipts .............................................. Column A, Line 3 above $ 0.00
14. Miscellaneous Increases to Cash ....................... Schedule I, Line 4 $ 0.00
15. Cash Payments ............................................ Column A, Line 8 above $ 502.08
16. ENDING CASH BALANCE ................................. Add Lines 12 + 13 + 14, then subtract Line 15 $ 1,082.18

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

### Cash Equivalents and Outstanding Debts

18. Cash Equivalents ........................................... See instructions on reverse $ 0.00
19. Outstanding Debts ........................................ Add Line 2 + Line 9 in Column A above $ 112,000.00

---

**Expenditure Limit Summary for State Candidates**

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

<table>
<thead>
<tr>
<th>Date of Election</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>/ / /</td>
<td>$</td>
</tr>
</tbody>
</table>

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

---

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).

---

FPSC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-PPPC (866/275-3772)
### Schedule E Payments Made

#### NAME OF FILER
Carmen Trutanich For District Attorney 2012

#### CODES:
- **COP**: campaign paraphernalia/misc.
- **CBS**: campaign consultants
- **CTR**: 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 communications
- **MTG**: meetings and appearances
- **OFC**: office expenses
- **PET**: petition circulating
- **PHO**: phone banks
- **POL**: polling and survey research
- **POS**: postage, delivery and messenger services
- **PRO**: professional services (legal, accounting)
- **PRT**: print ads
- **RAD**: radio airtime and production costs
- **RDG**: returned contributions
- **SAL**: campaign 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 candidate/sponsor
- **VOT**: voter registration
- **WEB**: information technology costs (internet, e-mail)

#### NAME AND ADDRESS OF PAYEE
**River City Business Services**
Sacramento, CA 95841

#### AMOUNT PAID

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRO</td>
<td></td>
<td>472.08</td>
</tr>
</tbody>
</table>

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

#### SUBTOTAL

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Itemized payments made this period (Include all Schedule E subtotals.)</td>
<td>$472.08</td>
</tr>
<tr>
<td>2. Unitemized payments made this period of under $100</td>
<td>$30.00</td>
</tr>
<tr>
<td>3. Total interest paid this period on loans (Enter amount from Schedule B, Part 1, Column (e).)</td>
<td>$0.00</td>
</tr>
<tr>
<td>4. Total payments made this period (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)</td>
<td>TOTAL $502.08</td>
</tr>
</tbody>
</table>

---

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

[www.netfile.com](http://www.netfile.com)
### Schedule F
Accrued Expenses (Unpaid Bills)

**NAME OF FILER**
Carmon Trutanich For District Attorney 2012

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

- **CMN:** campaign paraphernalia/misc.
- **CNS:** campaign consultants
- **CTB:** contribution (explain nonmonetary)*
- **CVC:** civic donations
- **FL:** candidate filing/ballot fees
- **FND:** fundraising events
- **IND:** independent expenditure supporting/opposing others (explain)*
- **LEG:** legal defense
- **LIT:** campaign literature and mailings
- **MBR:** member communications
- **MTG:** meetings and appearances
- **OFC:** office expenses
- **PET:** petition circulating
- **PHO:** phone banks
- **POL:** polling and survey research
- **PRO:** postage, delivery and messenger services
- **PRR:** professional services (legal, accounting)
- **PTT:** print ads
- **RAD:** radio airtime and production costs
- **RFD:** returned contributions
- **SAL:** campaign 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 candidate/sponsor
- **VOT:** voter registration
- **WEB:** information technology costs (internet, e-mail)

### NAME AND ADDRESS OF CREDITOR

<table>
<thead>
<tr>
<th>CREDITOR</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>AMOUNT INCURRED THIS PERIOD</th>
<th>AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shallman Communications</td>
<td>TEL Amount Disputed</td>
<td>$112,000.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Encino, CA 91436-</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>River City Business Services</td>
<td>PRO</td>
<td>472.08</td>
<td>0.00</td>
<td>472.08</td>
</tr>
<tr>
<td>Sacramento, CA 95841</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTALS** $112,472.08 $0.00 $472.08 $112,000.00

### Schedule F Summary
1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.) **INCURRED TOTALS** $0.00
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.) **PAID TOTALS** $472.08
3. Net change this period. **NET** $-472.08

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**www.netfile.com**