

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

Amendment (Explain Below)

Report covers period from <u>10/01/2012</u> through <u>10/20/2012</u> Date of election if applicable: (Month, Day, Year) <u>11/06/2012</u>	Date Stamp	CALIFORNIA FORM 465 Page <u>1</u> of <u>4</u> For Official Use Only
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1. Committee/Filer Information

I.D. NUMBER (If recipient committee)
820668

COMMITTEE/FILER'S NAME

San Jose Silicon Valley Chamber of Commerce Political Action Committee (ChamberPAC)

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
San Jose CA, 95113 (408) 291-5262

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer (If recipient committee)

NAME OF TREASURER

Robin Stephen

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
Encinitas CA, 92024 (760) 632-3600

OPTIONAL: FAX / E-MAIL ADDRESS

2. Name of Candidate or Measure Supported or Opposed

CHECK ONE

NAME OF CANDIDATE Rose Herrera	OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE City Council Member City of San Jose - District 8	SUPPORT <input checked="" type="checkbox"/>	OPPOSE <input type="checkbox"/>	
NAME OF BALLOT MEASURE	BALLOT NO./LETTER	JURISDICTION	SUPPORT <input type="checkbox"/>	OPPOSE <input type="checkbox"/>

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)
10/19/2012	TAB Communications, Inc. Fairoaks, CA 95628	Mailer	6,847.50	76,079.51
10/19/2012	A&A Distribution San Jose, CA 95112	Mailer - Printing/Design/Delivery	MEMO 6,465.00 Subpayment made through: TAB Communications, Inc.	
10/19/2012	TAB Communications, Inc. Fairoaks, CA 95628	Mailer	3,480.50	76,079.51

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SUPPLEMENTAL INDEPENDENT EXPENDITURE

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For use by an officeholder, candidate, or committee making independent expenditures totaling \$500 or more in a calendar year to support or oppose a single candidate or a single measure. This form must be filed at the same times and places as the campaign statements filed by the candidate supported or opposed or by a committee primarily formed to support or oppose the measure. A separate form must be filed for each candidate or measure being supported or opposed. This form is filed in addition to any other required campaign statements.

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from <u>10/01/2012</u>		
through <u>10/20/2012</u>		
Date of election if applicable: (Month, Day, Year)		Page <u>2</u> of <u>4</u>
<u>11/06/2012</u>		For Official Use Only

IV 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)
10/19/2012	United States Postal Service San Jose, CA 95101	Postage	695.76 MEMO Subpayment made through: TAB Communications, Inc.	
10/19/2012	Connexion Rocklin, CA 95765	Mailer - Printing/Design	2,317.99 MEMO Subpayment made through: TAB Communications, Inc.	
10/19/2012	TAB Communications, Inc. Fairoaks, CA 95628	Mailer	3,774.22	76,079.51
10/19/2012	Saigon West Garden Grove, CA 92841	Mailer - Translation/Design/File Preparation	2,467.98 MEMO Subpayment made through: TAB Communications, Inc.	
10/19/2012	United States Postal Service San Jose, CA 95101	Postage	793.60 MEMO Subpayment made through: TAB Communications, Inc.	
10/19/2012	TAB Communications, Inc. Fairoaks, CA 95628	Mailer	9,980.06	76,079.51

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10/19/2012	Connexion Rocklin, CA 95765	Mailer - Printing/Design	5,659.36 MEMO Subpayment made through: TAB Communications, Inc.	
10/19/2012	United States Postal Service San Jose, CA 95101	Postage	3,624.75 MEMO Subpayment made through: TAB Communications, Inc.	

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NAME OF FILER San Jose Silicon Valley Chamber of Commerce Political Action Committee (ChamberPAC)		I.D. NUMBER (If recipient com.) 820668

SEE INSTRUCTIONS ON REVERSE

4. Summary

1. Total independent expenditures of \$100 or more made this period. (Part 3.)	\$	24,082.28
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 \$	24,082.28

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
City of San Jose City Clerk

ADDRESS (NO. AND STREET)

200 E Santa Clara St #200

CITY STATE ZIP CODE

San Jose, CA 95113

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 _____
DATE

By _____
SIGNATURE OF FILER, TREASURER OR ASSISTANT TREASURER

Executed on _____
DATE

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

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT