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Campaign Finance: INDEPENDENT VOTERS LEAGUE

Election Cycle:

- 2015 through 2016
- Historical

View Information:

- General Information
- Electronic Filings

This is the official name of the committee, political party, or major donor as registered with the Secretary of State.

FILER ID:
588034

FILER PHONE:
(213) 489-4792

SUMMARY INFORMATION - INDEPENDENT VOTERS LEAGUE (ID# 588034)	
CURRENT STATUS	ACTIVE
<p>This committee has not electronically filed a Form 460/461/450 for this election cycle. For further information, click on prior year displays to see if historical filings are available. Also check for late contribution filings if a major filing deadline has not yet occurred for this election cycle.</p>	

Slate Mailer Organization Campaign Statement

(Government Code Sections 84218-84219)

Type or print in ink.

COVER PAGE

Date Stamp	CALIFORNIA 1992 FORM 401
1/9	
FOR OFFICIAL USE ONLY	

SEE INSTRUCTIONS ON REVERSE

Statement Covers Period

from 01/01/2015
through 02/14/2015

I Slate Mailer Organization Information

FULL NAME OF SLATE MAILER ORGANIZATION:
INDEPENDENT VOTERS LEAGUE ID NUMBER
588034

ADDRESS NO AND STREET

CITY STATE ZIP CODE PHONE NUMBER

LOS ANGELES CA 90010

NAME OF TREASURER:

FRED HUEBSCHER

ADDRESS NO AND STREET

CITY STATE ZIP CODE DAYTIME PHONE NUMBER

HERMOSA BEACH CA 90254

II Is This A General Purpose Committee?

If this Slate Mailer Organization is also a "general purpose committee" as defined in Government Code Section 82027.5, check box and attach the committee's campaign disclosure report to this statement.

Committee Report Attached

ID Number if Recipient Committee

III Summary of Payments

	(A) Total This Period	(B) Cumulative to Date (Since January 1 of calendar year covered)
1 TOTAL PAYMENTS RECEIVED	\$ <u>16004.00</u> <small>Sch. A, Line 3</small>	\$ <u>16004.00</u>
2 TOTAL PAYMENTS MADE	\$ <u>16295.00</u> <small>Sch. B, Line 3</small>	\$ <u>16295.00</u>

IV Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the 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 and correct.

Executed on 02/19/2015 At _____ By David L. Gould
DATE CITY AND STATE SIGNATURE OF RESPONSIBLE OFFICER

Name of Responsible Officer David L. Gould Title: ATR
TYPE OR PRINT

Schedule A Payments Received

SCHEDULE A

Statement covers period from <u>01/01/2015</u> through <u>02/14/2015</u>	CALIFORNIA 1992 FORM 401
	5/9
I.D NUMBER 588034	

SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

INDEPENDENT VOTERS LEAGUE

(1) DATE RECEIVED	(2) IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(3)		(4) AMOUNT RECEIVED THIS PERIOD	(5) CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		(a)	(b)		
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER SUPPORT OPPOSE		
01/30/2015 	Svonkin For Community College Board 2015 Los Angeles CA 90010 Reference No:	Scott Svonkin Community College Board Los Angeles	X	292.00	584.00
02/10/2015 	Campaign to Raise the Wage Los Angeles CA 90071 Reference No:		X	2200.00	2200.00
02/10/2015 	Freinds of Elito M. Santarina Carson CA 90745 Reference No:	Elito M. Santarina City Council Member Carson	X	1160.00	1160.00

SUBTOTAL

\$

Summary

- Amount Received - Payments of \$100 or More (Include all Schedule A subtotals) \$ _____
- Amount Received - Payments of Less than \$100 (Not itemized) \$ _____
- Total Payments Received (Line 1 + Line 2) Enter here and in Column A, Line 1, of the Summary of Payments section on Page 1 \$ _____

Schedule A Payments Received

SCHEDULE A

Statement covers period from <u>01/01/2015</u> through <u>02/14/2015</u>	CALIFORNIA 1992 FORM 401
	6/9
I.D NUMBER 588034	

SEE INSTRUCTIONS ON REVERSE
NAME OF SLATE MAILER ORGANIZATION:

INDEPENDENT VOTERS LEAGUE

(1) DATE RECEIVED	(2) IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(3)		(4) AMOUNT RECEIVED THIS PERIOD	(5) CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE	
		(a)	(b)			
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER			
			SUPPORT	OPPOSE		
02/10/2015 	Joe Merton for City Clerk 2014 Carson CA 90745 Reference No:	Joe Merton Local Treasurer Carson	X		1160.00	1160.00
02/13/2015 	Campaign to Raise the Wage Los Angeles CA 90071 Reference No:		X		-2200.00	0.00
02/13/2015 	Citizens for Increased Voter Parti - cipation, A Committee Supporting Yes on Charter Amendments 1 and 2 Los Angeles CA 90017 Reference No:	City of Los Angeles 1&2	X		2200.00	2200.00
				SUBTOTAL	\$ 16004.00	

Summary

- Amount Received - Payments of \$100 or More (Include all Schedule A subtotals) \$ _____
- Amount Received - Payments of Less than \$100 (Not itemized) \$ _____
- Total Payments Received (Line 1 + Line 2) Enter here and in Column A, Line 1, of the Summary of Payments section on Page 1 \$ _____

Slate Mailer Organization Campaign Statement

(Government Code Sections 84218-84219)

Type or print in ink.

COVER PAGE

SEE INSTRUCTIONS ON REVERSE

Statement Covers Period

from 02/17/2013
through 05/04/2013

Date Stamp	CALIFORNIA 1992 FORM 401
1/10	
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I Slate Mailer Organization Information

FULL NAME OF SLATE MAILER ORGANIZATION: INDEPENDENT VOTERS LEAGUE	ID NUMBER 588034
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ADDRESS NO AND STREET

CITY STATE ZIP CODE PHONE NUMBER

LOS ANGELES CA 90010

NAME OF TREASURER:

FRED HUEBSCHER

ADDRESS NO AND STREET

CITY STATE ZIP CODE DAYTIME PHONE NUMBER

HERMOSA BEACH CA 90254

II Is This A General Purpose Committee?

If this Slate Mailer Organization is also a "general purpose committee" as defined in Government Code Section 82027.5, check box and attach the committee's campaign disclosure report to this statement.

Committee Report Attached

ID Number if Recipient Committee

III Summary of Payments

	(A) Total This Period	(B) Cumulative to Date (Since January 1 of calendar year covered)
1 TOTAL PAYMENTS RECEIVED	\$ 19940.00 <small>Sch. A, Line 3</small>	\$ 56370.00
2 TOTAL PAYMENTS MADE	\$ 41076.39 <small>Sch. B, Line 3</small>	\$ 46076.39

IV Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the 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 and correct.

Executed on 05/09/2013 At _____ By David L. Gould
DATE CITY AND STATE SIGNATURE OF RESPONSIBLE OFFICER

Name of Responsible Officer David L. Gould Title: ATR
TYPE OR PRINT

FOR INFORMATION REQUIRED TO BE PROVIDED TO YOU PURSUANT TO THE INFORMATION PRACTICES ACT OF 1977, SEE

INFORMATION MANUAL ON CAMPAIGN DISCLOSURE PROVISIONS OF THE POLITICAL REFORM ACT FOR SLATE MAILER ORGANIZATIONS.

Schedule A Payments Received

SCHEDULE A

Statement covers period from <u>02/17/2013</u> through <u>05/04/2013</u>	CALIFORNIA 1992 FORM 401
	3/10

SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

INDEPENDENT VOTERS LEAGUE

I.D NUMBER

588034

(1) DATE RECEIVED	(2) IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(3)		(4) AMOUNT RECEIVED THIS PERIOD	(5) CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		(a)	(b)		
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		
			SUPPORT	OPPOSE	
04/09/2013 	Jim Dear For Mayor 2013 Carson CA 90745 Reference No:	Jim Dear Mayor Carson	X		1500.00 4000.00
04/09/2013 	Jim Dear For Mayor 2013 Carson CA 90745 Reference No:	Jim Dear Mayor Carson	X		2500.00 4000.00
04/16/2013 	Mike Feuer For City Attorney 2013-General Los Angeles CA 90048 Reference No:	Mike Feuer City Attorney City of Los Angeles	X		5000.00 5000.00

SUBTOTAL

\$

Summary

1. Amount Received - Payments of \$100 or More
(Include all Schedule A subtotals) \$ _____
2. Amount Received - Payments of Less than \$100
(Not itemized) \$ _____
3. Total Payments Received (Line 1 + Line 2) Enter here and in
Column A, Line 1, of the Summary of Payments section on Page 1 \$ _____