						COVER PAGE	
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200 - 84216.5)				Pate Stamp LOS ANGELES (2007 AUG - 1	OUNTY -	CALIFORNIA 460	
	Statemen	nt covers period	Date of Election if applicable:	2927 AUG -1 AM		A For Official Use Only	
	from through	05/21/2006 06/30/2006	(Month, Day, Year)	CAMPAIGN FINA DISCLOSURE SEC	NCE		
1. Type of Recipient Committee:			2. Type of Stateme	nt:			
 Officeholder, Candidate Controlled Committee O State Candidate Election Committee O Recall General Purpose Committee O Sponsored O Small Contributor Committee O Political Party/Central Committee 	Ballot Measure Co O Primarily Form O Controlled O Sponsored Primarily Formed Officeholder Com	ed Candidate	 Pre-election State Semi-annual State Termination State Amendment (Explanation Cover 	ment nent ain below)	Supplem Stateme	Odd-Year Report iental Pre-election nt - Attach Form 495	
3. Committee Information	1.D. NUMBER 963101		Treasurer(s)				
			NAME OF TREASURER				
Yaroslavsky In'98			Mary Ellen Padili MAILING ADDRESS	.a	<u> </u>		
STREET ADDRESS (NO P.O. BOX)				STATE	ZIP CODE	AREA CODE/PHONE	
CITY STATE	ZIP CODE A	AREA CODE/PHONE	NAME OF ASSISTANT TREASURER,	IF ANY			
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	x		MAILING ADDRESS				
CITY STATE	ZIP CODE A	AREA CODE/PHONE		STATE	ZIP CODE	AREA CODE/PHONE	
OPTIONAL: FAXE-MAIL ADDRESS						· ()	
			OPTIONAL: FAX/E-MAIL ADDRESS				

4. Verification

ŧ.

۰.

I have used all reasonable diligence in preparing and reviewing this 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 on7/30/07	Βv	Manshell Pahlle
	Ву	SIGNATURE OF TREASURER OF ASSISTANT TREASURER
Executed on	Ву	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT
Executed onOATE	Ву	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT
S/CCW - PCAB03 01439 (Rev. January/05)		State of California Fair Political Practices Commission.

COVER PAGE - PART 2

CALIFOR FORM	^{RNIA} 46	50
Page	2 of	4

. Officeholder or Candidate Controlled Committee		6. Primarily Formed Ballot Measure Committee				
NAME OF OFFICEHOLDER OF CANDIDATE		NAME OF BALLOT MEASUR	E			
Zev Yaroslavsky						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) County Supervisor, District 3, L. A. County		BALLOT NO. OR LETTER JURISDICTION				
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP CODE		Identify the controlling officeholder, candidate, or state measure proponent, if any.				
		NAME OF OFFICEHOLDER,	CANDIDATE, OR PROPO	DNENT		
Related Committees Not Included in this Statement	t: List any committees					
not included in this consolidated statement that are controlled by formed to receive contributions or to make expenditures on beha	you or which are primarily	OFFICE SOUGHT OR HELD		DISTF	ICT NO. IF ANY	
COMMITTEE NAME	I.D. NUMBER		<u> </u>	l	· _	
Yaroslavsky for Government Reform	962917	7. Primarily Formed Candidate/Officeholder Committee				
NAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER	OR CANDIDATE	OFFICE SOUGHT OR HELD		
Mary Ellen Padilla						
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)		NAME OF OFFICEHOLDER		OFFICE SOUGHT OR HELD		
CITY STATE ZIP C	ODE AREA CODE/PHONE	NAME OF OFFICEHOLDER	OR CANDIDATE	OFFICE SOUGHT OR HELD		
COMMITTEE NAME	I.D. NUMBER	NAME OF OFFICEHOLDER	OR CANDIDATE	OFFICE SOUGHT OR HELD		
Supervisor Yaroslavsky Officeholder	983499					
NAME OF TREASURER	CONTROLLED COMMITTEE?					
Mary Ellen Padilla				,u		
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)		_				
CITY STATE ZIP C	ODE AREA CODE/PHONE	_				
Verselevely in 2006		· · · · ·	<u> </u>			
Yaroslavsky in 2006 ID# 1278548		of Zev Yaroslav	sky			
101 14/0340	ID# 1233	881				