Form 462
Verification of Independent Expenditures

CALIFORNIA FORM **462**

This verification form identifies an individual responsible for ensuring that the campaign committee's independent expenditures were not coordinated with the listed candidate or measure committee (or the opponent) and that the committee will report all contributions and reimbursements as required by law. An independent expenditure is not subject to state or local contribution limits.

☐ Amendment (Explain)

1. Name of Committee:

NAME OF RECIPIENT COMMITTEE, ENTITY OR INDIVIDUAL	COMMITTEE ID #
Palm Springs Police Officers Assn. PAC	0951841

BUSINESS STREET ADDRESS	CITY
1415 L Street, Ste. 410	Sacramento

STATE	ZIP CODE	E-MAIL	TELEPHONE NUMBER
CA	95814	ordoslaw@jps.net	(916) 556-1776

2. Candidates or Measures:

This committee has reported independent expenditure(s) to support or oppose the candidate(s) or measure(s) listed on a ballot for the election date identified below. (Note: The reporting of an independent expenditure may occur after this form is filed if an independent expenditure is made before the 90 day-24 hour reporting period of Government Code Sections 84204 and 85500.)

NAME OF CANDIDATE (First/Last)/BALLOT MEASURE	SUPPORT	OPPOSE	OFFICE SOUGHT OR HELD/ BALLOT NO./LETTER	JURISDICTION AND DISTRICT, IF ANY	ELECTION DATE
Chris Mills	✓		City Council	City of Palm Springs	11/05/2013
Ginny Foat	✓		City Council	City of Palm Springs	11/05/2013

3. Verification (Check One): ☑ Principal Officer ☐ Candidate/Officeholder ☐ State Ballot Measure Proponent

I have not received any unreported contributions or reimbursements to make these independent expenditures. I have not coordinated any expenditure made during this reporting period with the candidate or the opponent of the candidate who is the subject of the expenditure, with the proponent or the opponent of the state measure that is the subject of the expenditure, or with the agents of the candidate or the opponent of the candidate or the state measure proponent or opponent. **I certify under penalty of perjury under the laws of the State of California that the following is true and correct.**

Signature _____ Printed Name Wayne Ordos Signed on 10/28/2013 (month, day, year)