

Law Offices of

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LLP

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2013 JAN 30 AM 10:47
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January 29, 2013

VIA UPS

Federal Election Commission
999 E. Street, N.W.
Washington, DC 20463

Re: California State Council of Service Employees Issues Committee
FEC ID C90014010:

Greetings:

Enclosed for filing is an original plus two copies of the following for the above-referenced party:

Form: FEC 5
Period: January 31 Year End Report

Please endorse a copy of the enclosed report as acknowledgment of your receipt and return it to our office in the envelope provided.

Sincerely,

OLSON, HAGEL & FISHBURN LLP



LACEY E. KEYS, Associate Attorney

Enclosures

I:\WPDOC\PUBLIC\POLA\89013-8\FEC Form 5\Q4 2012 Transmittal Letter.doc

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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

2013 JAN 30 AM 10:47
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1. (a) Name of Individual, Organization or Corporation California State Council of Service Employees Issues Committee		3. FEC Identification Number C 90014010
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1007 7th Street, 4th Floor		
(c) City, State and ZIP Code Sacramento, CA 95814		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year-End Report

24-Hour Report
 48-Hour Report

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

10	01	2012
THROUGH		
12	31	2012

6. TOTAL CONTRIBUTIONS 0.00

7. TOTAL INDEPENDENT EXPENDITURES 10,325.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Lathonza Butler	SIGNATURE 	DATE 1/28/13
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NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

For further information, contact:
Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
California State Council of Service Employees Issues Committee

Full Name (Last, First, Middle Initial) of Payee The Strategy Group, Inc.		Date MM / DD / YYYY 10 / 23 / 2012
Mailing Address 1603 Orington Avenue, Suite 1730		Amount 7,116.00
City Evanston	State IL	
Zip Code 60201		
Purpose of Expenditure Direct Mail	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		State: _____ District: _____
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 15,316.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 12 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Phil Giarrizzo Campaigns Inc.		Date MM / DD / YYYY 10 / 25 / 2012
Mailing Address 1215 19th Street, 2nd Floor		Amount 3,209.00
City Sacramento	State CA	
Zip Code 95811		
Purpose of Expenditure Direct Mail	Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		State: _____ District: _____
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 15,316.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 12 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		MM / DD / YYYY
City	State	Amount
Zip Code		
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		State: _____ District: _____
Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures	10,325.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	10,325.00

(carry total from last page forward to Line 7)

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>UPS</i>	Shipping Date <i>1/29/2013</i>
	Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JR</i> PREPARER (3/2005)	<i>1/30/2013</i> DATE PREPARED