

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Costa Mesa First		Date of This Filing 09/06/2016	RECEIVED Date Stamp CITY CLERK 16 OCT -3 PM 1:07 CITY OF COSTA MESA BY <u>AD Rountes</u>	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (714) 549-5884	I.D. NUMBER (if applicable) 1332564	Report No. <u>1</u>		
STREET ADDRESS PO Box 2282		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Costa Mesa	STATE CA	ZIP CODE 92628	No. of Pages <u>1</u>	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
				Initiative to require voter approval of certain projects			
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE
				Y	Costa Mesa	X	

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
09-23-16	signs, flyers \$1240	\$540

Reason for Amendment: _____