

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Costa Mesa for Responsible Government		Date of This Filing Oct. 18, 2016	<div style="border: 1px solid black; padding: 5px;"> <p>RECEIVED Date Stamp CITY CLERK</p> <p>16 OCT 18 PM 2: 58</p> <p>CITY OF COSTA MESA BY <u>BG</u></p> </div>	<div style="border: 1px solid black; padding: 5px;"> <p>CALIFORNIA FORM 496</p> <p>For Official Use Only</p> </div>
AREA CODE/PHONE NUMBER 714.326.6056	I.D. NUMBER (if applicable) 1344077	Report No. <u>1</u>		
STREET ADDRESS 3000 Ceylon Drive		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Costa Mesa	STATE CA	ZIP CODE 92626		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Sandy Genis				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD Costa Mesa City Council	DISTRICT NO.	SUPPORT <input checked="" type="checkbox"/>	OPPOSE <input type="checkbox"/>	BALLOT NO./LETTER	JURISDICTION	SUPPORT <input type="checkbox"/>	OPPOSE <input type="checkbox"/>

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/7/2016	Campaign Flyer Promoting 3 City Council Candidates Sandy Genis Portion	\$157.50
10/10/2016	Yard Signs Promoting 3 City Council Candidates Sandy Genis Portion	\$491.66
10/17/2016	Yard Signs Promoting 3 City Council Candidates Sandy Genis Portion	\$400.00
	Total YTD 10/18/2016 Sandy Genis \$1,857.02	Total \$1,049.16

Reason for Amendment: _____

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Costa Mesans for Responsible Government (CM4RG)

I.D. NUMBER (If applicable)

1344077

3. Contributions of \$100 or More Received*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE **	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
9/25/2016	Denise Moon [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Project Manager Kaiser Permanente	\$250.00	If loan, enter interest rate, if any _____ %
9/30/2016	Tim Starn [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Director Infinity Helicopter Leasing	\$100.00	If loan, enter interest rate, if any _____ %
10/3/2016	Robin Leffler [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00	If loan, enter interest rate, if any _____ %
10/6/2016	Judith Butler [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00	If loan, enter interest rate, if any _____ %
10/8/2016	Eileen Redmon [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Accountant Self	\$100.00	If loan, enter interest rate, if any _____ %
10/9/2016	Gloria Franklin [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Spectrum Chemical	\$100.00	If loan, enter interest rate, if any _____ %

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

****Contributor Codes**
 IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee