

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER PACIFICA BACPAC		Date of This Filing 11/05/2018	Date Stamp	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER 650-738-4900	I.D. NUMBER (if applicable) 1369839	Report No. 4	<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> RECEIVED NOV 05 2018 CITY CLERK </div>	
STREET ADDRESS 1005 Terra NOVA BL STE A		<input type="checkbox"/> Amendment to Report No. (explain below)		
CITY PACIFICA, CA 94044	STATE	ZIP CODE		
		No. of Pages 1		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED MIKE O'NEILL				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD PACIFICA CITY COUNCIL	DISTRICT NO. PACIFICA	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
11/05/2018	PACIFICA TRIBUNE AD (2)	409.50

Reason for Amendment: _____