

501-5-28

496 Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER WATCHDOG FOR SAN CLEMENTE RESPONSIBLE GOVERNMENT		Date of This Filing <u>10/26/2012</u>	Date Stamp	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER [REDACTED]	I.D. NUMBER (if applicable) 1333021	Report No. <u>1</u>	CITY OF SAN CLEMENTE	
STREET ADDRESS 63 VIA PICO PLAZA SUITE 113		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	OCT 29 2012	
CITY SAN CLEMENTE	STATE CA	ZIP CODE 92672	No. of Pages _____	CITY CLERK DEPARTMENT

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED JIM DAHL/MICHAEL MORTENSON				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD CITY COUNCIL	DISTRICT NO.	SUPPORT	OPPOSE ✓	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/26/2012	POSTAGE FOR FLYERS	3382.46

Reason for Amendment: _____