

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Association of Orange County Deputy Sheriffs Independent Expenditure Committee		Date of This Filing <u>10/30/2019</u>	Date Stamp	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (916) 556-1776	I.D. NUMBER (if applicable) 1265580	Report No. <u>103019-2</u>	City of San Clemente OCT 31 2019 City Clerk Department	
STREET ADDRESS 1121 L Street Suite 200		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Sacramento	STATE CA	ZIP CODE 95814	No. of Pages <u>1</u>	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Jackson Hinkle				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member: City of San Clemente	DISTRICT NO.	SUPPORT	OPPOSE X	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/29/2019	Mailer Cumulative to date total \$19503.37	7,259.83
10/30/2019	Mailer Cumulative to date total \$19503.37	1,374.16
10/30/2019	Robo Call Cumulative to date total \$19503.37	1,597.50

Reason for Amendment: _____