

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Orange County Professional Firefighters Assn. Local 3631 PAC		Date of This Filing 10/05/2024	Date Stamp City of San Clemente OCT 07 2024	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (916) 556-1776	I.D. NUMBER (if applicable) 950925	Report No. 2024-10-4		
STREET ADDRESS 1121 L Street, Ste. 200		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Sacramento	STATE CA	ZIP CODE 95814	City Clerk Department No. of Pages 1	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Sarah Schneider				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member City of San Clemente	DISTRICT NO. District 4	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
10/04/2024	Campaign Mailer Cumulative to date total \$4620.00	4,620.00

Reason for Amendment: _____