

# 496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

<b>NAME OF FILER</b> PACIFICA BACPAC		<b>Date of This Filing</b> 10/09/2018	<b>Date Stamp</b> RECEIVED OCT 09 2018 <i>City Clerk</i> Human Resources	<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> 650-738-4900	<b>I.D. NUMBER (if applicable)</b> 1369839	<b>Report No.</b> 1		
<b>STREET ADDRESS</b> TERRA NOVA STE A		<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
<b>CITY</b> PACIFICA	<b>STATE</b> CA	<b>ZIP CODE</b> 94044	<b>No. of Pages</b> 1	

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b> VICKI FLORES				<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b>			
<b>OFFICE SOUGHT OR HELD</b> CITY COUNCIL	<b>DISTRICT NO.</b> PACIFICA	<b>SUPPORT</b> X	<b>OPPOSE</b>	<b>BALLOT NO./LETTER</b>	<b>JURISDICTION</b>	<b>SUPPORT</b>	<b>OPPOSE</b>

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/09/2018	MAILING IN SUPPORT	2180.38

Reason for Amendment: \_\_\_\_\_