

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Pacifica BACPAC		Date of This Filing 10/17/2018	Date Stamp RECEIVED OCT 17 2018 CITY CLERK	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER 650-738-4900	I.D. NUMBER (if applicable) 1369839	Report No. 2		
STREET ADDRESS 1005 TERRA NOVA BL STE A		<input checked="" type="checkbox"/> Amendment to Report No. 1 <small>(explain below)</small>		
CITY PACIFICA	STATE CA	ZIP CODE 94044	No. of Pages 1	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED MICHAEL 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
10/09/2018	MAILING IN SUPPORT	2180.38

DISCLOSURE ERROR ON ORIGINAL 496 DATED 10/09/2018

Reason for Amendment: _____