

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 OCT 17 2018	CALIFORNIA FORM 496 RECEIVED For Official Use Only CITY CLERK
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. _____ (explain below) 1		
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 SUE BECKMEYER				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

Reason for Amendment: DISCLOSURE ERROR ON ORIGINAL 496 DATED 10/09/2018