496 Independent	Expenditure R	leport	· Aı		ype or prir y be round	t in ink. ed to whole dollars.	RECE!	/EDBY	NDENT EXPENDITUR	E REPORT
NAME OF FILER COMMITTEE TO ELECT BO	OBBY SHRIVER SUPERV	ISOR 2014			Date of This Fil	ng <u>10/30/2014</u>	Date St - 2014 OCT 3		CALIFORNIA FORM	496
AREA CODE/PHONE NUMBER		I.D. NUMBE 13678	ER (ifapplicable)		Report	No. <u>10302014</u>	- CAMPAIG		For Official Use	Only
STREET ADDRESS		STATE	ZIP CODE		Ame to Repo (explain be	rt No	DISCLOSU - DISCLOSU	1/E 2501	41085	1
1. List Only One Cand		ISUre		· · · · · · · · · · · · · · · · · · ·	1	NAME OF BALLOT MEA	SURE SUPPORTED OF	OPPOSED		
OFFICE SOUGHT OR HELI County Supervisor: COUNTY, #3		DISTRICT NO.	SUPPORT	OPPOSE		BALLOT NO/LETTER	JURISDICTIO	DN	SUPPORT	OPPOSE
2. Independent Exper	nditures Made Attacha	additional informati							AMOUNT	
10/29/2014	VOTER FILE Cumulative to da	te total \$1040	-	SCRIPTION (JF EAFENDI	IONE			AMOUNT	999.08
10/29/2014	TRANSLATION SERVI Cumulative to da		982.88		<u> </u>					400.00
10/29/2014	MAILER Cumulative to da	te total \$1040	982.88							32,780.40
10/29/2014	GRAPHIC DESIGN Cumulative to da	te total \$1040	982.88							1,302.00
Reason for Amendment:										

496 Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

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NAME OF FILER					Date of		Date Stamp	CALIFORNIA	400
COMMITTEE TO BLECT BOBBY SHRIVER SUPERVISOR 2014				This Filing	2014		FORM	<u>490</u>	
AREA CODE/PHONE NUMBER (l'applicatio)							For Official Use	Only	
		ł	1367856		Report No. 10302014		•	r or Official Ose	City
STREET ADDRESS		13070	50		•	ļ			
SIREEI ADDRESS				·	☐ Amendment				
					to Report No				
CITY		STATE	ZIPCODE		(explain below)				
					No. of Pages3			<u></u>	
1. List Only One C	andidate or Ballot N	deasure .							
NAME OF CANDIDATE	SUPPORTED OR OPPOSE	D			NAME OF BALL	OT MEASURE	SUPPORTED OR OPPOSED		
BOBBY SHRIVER									
OFFICE SOUGHT OR	HEI D	DISTRICT NO.	SUPPORT	OPPOSE	DALLOT NOAS	TTTD	LINDIEDICTION	SUPPOR	r L oppoor
		DISTRICT NO.		OPPOSE	BALLOT NO.LE	ITEK	JURISDICTION	SUPPOR	T OPPOSE
COUNTY, #3	or: LOS ANGELES		X						
2 Indonendout Ev	penditures Made Atta	1 1						· · · · · · · · · · · · · · · · · · ·	
z. muepenuent Ex	periorures made Atta	en additional informati	on on appropri	ately labele	a conunuation sneets.				
DATE	j		DES	SCRIPTION C	F EXPENDITURE			MOUNT	•
10/29/2014	RADIO ADS Cumulative to	date total \$1040	982.88						40,000.0
						 			
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Reason for Amendme	ent:					·		· · · · · · · · · · · · · · · · · · ·	
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								FPPC Form 496 (March/201

496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

FORM 496	
I.D. NUMBER (If applicable)	

Wiscons and the second	I.D. NUMBER (If ap)	plicable)
NAME OF FILER		
COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014	1367856	
	J	

3. Contributions of \$100 or More Received*

S. Continue	TOTAL OF MICH AND A MICH AND A MICHARD		· ·		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE**	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
10/29/2014	JOHN DAVIS	IND COM OTH PTY	PRODUCER DAVIS ENTERTAINMENT	4,500.00	If loan, enter interest rate, if any %
10/29/2014	JONATHAN WACHTER	IND COM OTH PTY	STUDENT	2,500.00	If loan, enter interest rate, if any %
10/29/2014	TESS WACHTER	X IND COM OTH PTY	NONE	2,500.00	If loan, enter interest rate, if any %
		DIND COM DTH DEPTY			If loan, enter interest rate, if any %
		IND COM OTH PTY SCC			If loan, enter interest rate, if any %
		IND COM OTH PTY			If loan, enter interest rate, if any %

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3. **Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 496 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)