

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER Coalition to Support Mitch Englander for Supervisor 2016		Date of This Filing <u>05/31/2016</u>	Report No. <u>05312016-1</u>	<input type="checkbox"/> Amendment to Report No. _____ (explain below)	No. of Pages <u>2</u>	RECEIVED LOS ANGELES COUNTY 2016 JUN -1 AM 10:59 CAMPAIGN FINANCE	496 INDEPENDENT EXPENDITURE REPORT CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1381057						
STREET ADDRESS							
CITY	STATE	ZIP CODE					

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Mitchell Englander				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD County Supervisor: Los Angeles County District 5	DISTRICT NO. 5	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
05/30/2016	Radio Buy to Support Mitch Englander Cumulative to date total \$271729.82	50,000.00

Reason for Amendment: _____

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CALIFORNIA FORM 496

NAME OF FILER
Coalition to Support Mitch Englander for Supervisor 2016

I.D. NUMBER (if applicable)
1381057

3. Contributions of \$100 or More Received*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID NUMBER)	CONTRIBUTOR CODE **	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
05/26/2016	California Conference Board Amalgamated Transit Union PAC Committee ID# 761357	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		20,000.00	If loan, enter interest rate, if any _____%
05/24/2016	Laborers' Local 300 Committee ID# 950674	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		17,000.00	If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____%
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			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