496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

CALIFORNIA FORM **496**

NAME OF FILER			
Working People supporting Hahn for Supervisor 2016 sponsored by the Los Angeles County Federation of Labor, AFL-CIO			
AREA CODE/PHONE NUMBER		I.D. NUMBER *(if applicable)*	
		1388881	
STREET ADDRESS			
CITY		STATE	ZIP CODE

Date of This Filing ___10/31/2016___

Report No. _20870_____

☐ **Amendment to Report No.** _____
(explain below)

No. of Pages _____2_____

Date Stamp

2016 NOV -1

CAMPAIGN FINANCE

For Official Use Only

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
Janice Hahn							
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE
County Supervisor: Los Angeles County District 4	4	X					

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/31/2016	Mailer Cumulative to date total $607546.01	60,917.82

Reason for Amendment: _____

_____

FPPC Form 496 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

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3. Contributions of $100 or More Received*

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
10/29/2016	Coalition for a Better Los Angeles sponsored by Plumbers Local Union 78 Committee ID# 1322140	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		5,000.00	If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			If loan, enter interest rate, if any _____%
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ 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

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