Pase: 001

ID: CAMPAIGN FINANCE

3.2020 6:29PM

Mar.

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| 496 Independent Expenditure Report | | | Amounts ma | y be rounded to whole dollars. | | 7070 MAR -L DM L: 05 | | | |
|---|------------------|-------------|------------|--------------------------------|---------------------------------------|-----------------------|--|--|--|
| NAME OF FILER Morking Californians to Support Wesson Council 2020, sponeored by Local Inter Morkers Union 18 | | | | Date of This Filing 3/3/20 | Dale Stamp | FORM 496 | | | |
| AREA CODE/PHONE NUMBER | | MBER (Fapps | cable) | Report No. 0303202 | OA | For Official Use Only | | | |
| (213) 452-6565 | 1425101 | | | | | | | | |
| STREET ADDRESS | | | | Amendment to Report No. | | | | | |
| CITY | STATE | ZIP | CODE | (expisin below) | · · · · · · · · · · · · · · · · · · · | | | | |
| Los Angeles | CA | 900 | 04 | No. of Pages 2 | | | | | |
| | | | | | | | | | |
| 1. List Only One Candidate o | r Ballot Measure | е | | | | | | | |
| List Only One Candidate on or NAME OF CANDIDATE SUPPORTED OR OF Herb Wesson | | е | | NAME OF BALLOT M | EASURE SUPPORTED OR OPPOSED | | | | |
| NAME OF CANDIDATE SUPPORTED OR OF | | SUPPORT | OPPOSE | NAME OF BALLOT M | | SUPPORT OPPOSE | | | |
| Herb Wesson | PPOSED | | OPPOSE | | | SUPPORT OPPOSE | | | |
| NAME OF CANDIDATE SUPPORTED OR OF Herb Wesson OFFICE SOUGHT OR HELD | DISTRICT NO. | SUPPORT | | | Jurisbiction | SUPPORT OPPOSE | | | |
| NAME OF CANDIDATE SUPPORTED OR OF Herb Wesson OFFICE SOUGHT OR HELD County Supervisor | DISTRICT NO. | SUPPORT | | BALLOT NO JETTER | JURISDICTION n sheets. | SUPPORT OPPOSE | | | |

Reason for Amendment:

FPPC Form 496 (Jan/2015)
FPPC Advice: advice@fppc.ca.gov (955/276-3772)
www.fppc.ca.gov

Pase: 002

MAR-03-2020 06:30PM From:

496 Independent Expenditure Report

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2020 MAR - 4 PM 4: 05 FORM 496

PROPOSITION B UNI

NAME OF FILER

Morking Californians to Support Wesson for Supervisor and Ridley-Thomas for Council 2020, sponsored by Local International Brotherhood of Electrical Morkers Union 10

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 |
|--|---|------------------------|--|--------------------|---|
| California Independent Petroleum Association PAC 02/25/2020 Irvine, CA 92618-4691 ID: 822237 | | □IND ☑COM □OTH | | \$25,000.00 | (f loan, enter interest rate, if any |
| | | □PTY □SCC | | | % |
| 02/28/2020 | Committee to Expand the Middle Class, supported by Airbnb, Inc. | □IND ☑COM □OTH | | \$50,000.00 | If Joan, enter Interest rate, if any |
| | San Francisco, CA 94103-5070 ID: 1381999 | □PTY □scc | | | % |

| Reason for Amendment: | |
|-----------------------|--|
| | |
| | |

*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 (e.g., business entity)

PTY-Political Party

SCG-Small Contributor Committee

FPPC Form 496 (Jan/2016) FPPC Advice: advice@ppc.ca.gov (966/275-3772) www.fppc.ca.gov