

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

RECEIVED BY
LOS ANGELES
496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER NEIGHBORHOOD SAFETY COALITION (SPONSORED BY ASSOCIATION FOR LOS ANGELES DEPUTY SHERIFFS) A COMMITTEE TO SUPPORT ALEX VILLANUEVA FOR LA		Date of This Filing 11/14/2018	Date Stamp 2018 NOV 14 PM 1:05 CAMPAIGN FINANCE	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (213) 489-4792	I.D. NUMBER (if applicable) 1412957	Report No. 1		
STREET ADDRESS 		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY LONG BEACH	STATE CA	ZIP CODE 90802	No. of Pages 3	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Alex Villanueva				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD Sheriff: Los Angeles County	DISTRICT NO.	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
11/06/2018	Mailer & Postage Cumulative to date total \$1525543.66	313,232.77
11/06/2018	Mailer & Postage Cumulative to date total \$1525543.66	99,776.89
11/06/2018	Mailer & Postage Cumulative to date total \$1525543.66	16,351.03
11/06/2018	Mailer & Postage Cumulative to date total \$1525543.66	55,807.86

Reason for Amendment: _____

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496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER NEIGHBORHOOD SAFETY COALITION (SPONSORED BY ASSOCIATION FOR LOS ANGELES DEPUTY SHERIFFS) A COMMITTEE TO SUPPORT ALEX VILLANUEVA FOR LA		Date of This Filing 11/14/2018 Report No. 1 <input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages 3	Date Stamp CALIFORNIA FORM 496 For Official Use Only
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CITY LONG BEACH	STATE CA	ZIP CODE 90802	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Alex Villanueva				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED _____			
OFFICE SOUGHT OR HELD Sheriff: Los Angeles County	DISTRICT NO. _____	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
11/06/2018	Mailer & Postage Cumulative to date total \$1525543.66	16,246.36

Reason for Amendment: _____

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CALIFORNIA FORM **496**

NAME OF FILER
 NEIGHBORHOOD SAFETY COALITION (SPONSORED BY ASSOCIATION FOR LOS ANGELES DEPUTY SHERIFFS) A COMMITTEE TO SUPPORT ALEX VILLANUEVA FOR LA COUNTY SHERIFF 2018

I.D. NUMBER (if applicable)

1412957

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
10/26/2018	Los Angeles County Federation of Labor AFL-CIO Council on Political Education Los Angeles, CA 90006 Committee ID# 742204 IN KIND-POL	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		19,000.00	If loan, enter interest rate, if any _____ %
10/31/2018	ASSOCIATION FOR LOS ANGELES DEPUTY SHERIFFS STATE PAC Monterey Park, CA 91755 Committee ID# 1359227	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500,000.00	If loan, enter interest rate, if any _____ %
10/31/2018	Service Employees International Union Local 721, CTW, CLC Los Angeles, CA 90017 Committee ID# 1296889	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		50,000.00	If loan, enter interest rate, if any _____ %
11/01/2018	ASSOCIATION FOR LOS ANGELES DEPUTY SHERIFFS STATE PAC Monterey Park, CA 91755 Committee ID# 1359227	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500,000.00	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 _____ %

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