

#496 P.002/005

10/06/2014 16:43

From: 19165561233

Late Independent Expenditure Report

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

LATE INDEPENDENT EXPENDITURE REPORT

| | | | | |
|--|--|--|--|--|
| NAME OF FILER Newport Beach Police Employees Association Political Action Committee | | Date of This Filing 10/06/2014 | RECEIVED Date Stamp 2014 OCT -6 PM 5:18 OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH | CALIFORNIA FORM 496 For Official Use Only |
| AREA CODE/PHONE NUMBER (916) 556-1776 | I.D. NUMBER (if applicable) 1319106 | Report No. 1172-41006 | | |
| STREET ADDRESS 1415 L St Ste 410 | | <input type="checkbox"/> Amendment to Report No. 1172-41006 (explain below) | | |
| CITY Sacramento | STATE CA | ZIP CODE 95814 | | |
| | | No. of Pages 1 | | |

1. List Only One Candidate or Ballot Measure

| | | | | | | | |
|---|--------------------------------------|--------------|--------|---|--------------|---------|--------|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED Diane Dixon | | | | NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED | | | |
| OFFICE SOUGHT OR HELD/DISTRICT NO. 1 City | City Council Member Newport Beach | 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 |
|------------|----------------------------|---------|
| 10/06/2014 | MAILER | 3018.86 |
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Reason for Amendment: _____