DURATION PAGES		19K2
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Reason for Amendment:

496 Independent Expe	nditure Repor	t		Type or print in link. By be rounded to wh	ole dellars.	RECEIVE NOE	PENDENT EXP		REPOR
NAME OF FILER Newport Beach Firefighters As	sociation PAC	·		Date of This Filing	02/02/2015	Dale Stamp	CALIFOR		96
AREA CODE/PHONE NUMBER (562) 427-2100	Ţi	.d. number #*** 1243243	licabio)	Report No.		5 FEB -4 PM 4: 33	FOR I	Afficial Use Only	
STREET ADDRESS California Political Law, Inc. 36 CITY Long Beach		ATE ZIP	CODE	Amendment to Report No.	001 Cn	OFFICE OF THE CITY CLERK TY OF HONDON			
1. List Only One Candida	te or Ballot Meas	sure		No. of Pages	2 0	<u>- Language de la companya de la com</u>			
NAME OF CANDIDATE SUPPORTED Mike Toerge	OR OPPOSED			NAME	OF BALLOT MEASURE	SUPPORTED OR OPPOSED			····
Newport Beach City Counc	il 6	WC. SUPPORT	OPPOSE	BALLO	NO./LETTER	JURISDICTION	-	SUPPORT	OPPOSE
2. Independent Expendit	ures Made Attach	additional inform	etion on appro	opriately labeled co	tinuation sheets.				<u>.</u>
DATE				DESCRIPTION OF	EXPENDITURE			AMOUN	भा
11/01/2014		LIT supportin	g Mike To	erge for City C	council 2014 (C	umulative: \$16,952,02)		\$3,	140.85
11/01/2014	,	LIT supportin	g Mike To	erge for City C	Council 2014 (C	umulative: \$16,952.02)		\$7	754.16
11/01/2014	LIT supporting Mike Toerge for City Council 2014 (Cumulative: \$16,952.02) \$2,625.39								
11/01/2014	F	OS supporti	ng Mike To	cerge for City	Council 2014 (C	Cumulative: \$16,952.02)		\$3,1	158.87
11/01/2014	Subvendor	payment: \$3	,158.87 to	US Post Offic	e 3101 W. Sunfi	ower Ave. Santa Ana, CA 9	2799		\$0.00
11/01/2014	F	PRT supportir	ng Mike To	perge for City (Council 2014 (C	Cumulative: \$16,952.02)		\$8	882.13

Add expenditure

FPPC Form 496 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

No. 4863

'Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

400 Independent Expenditure report	CALIFORNIA 496 FORM	
Compiler Company	I.D. NUMBER (if applicable)	
Newport Beach Firefighters Association PAC	1243243	

3. Contributions of \$100 or More Received*

DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTR	UTOR CONTRIBUTOR CODE **	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
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**Contributor Codes

COM-Recipient Committee (other than PTY or SCC) OTH-Other (e.g., business entity) PTY-Political Party **SCC-Small Contributor Committee**

FPPC Form 496 (March/2011) FPPC Toll-Free Helpline: 868/ASK-FPPC [866/275-3772]