

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

NAME OF FILER LINE IN THE SAND			Date of This Filing 10.21.2016	Date Stamp RECEIVED 2016 OCT 21 PM 2:34 OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER 949.612.7521	I.D. NUMBER (if applicable) 1369133	Report No. 496.JH.001			
STREET ADDRESS PO BOX 15725			<input checked="" type="checkbox"/> Amendment to Report No. 496.JH.001 (explain below)		
CITY Newport Beach	STATE CA	ZIP CODE 92659	No. of Pages 2		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
JEFF HERDMAN							
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE
Newport Beach City Council	5	X					

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

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
09.24.2016	Full Page Print Ad & Flyers	508.50
09.28.2016	25,000 City Council Candidate Flyers	858.60
10.04.2016	Full Page Ad	370.00
10.11.2016	Aborted Mailer	162.50

Reason for Amendment: Corrected Totals on Contributions & 09.24.2016 Full Page Print Ad & Flyers Independent Expenditure

496 Independent Expenditure Report

CALIFORNIA
FORM **496**

NAME OF FILER

LINE IN THE SAND

I.D. NUMBER (if applicable)

1369133

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
09.27.2016	Jill Ayres [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	250.00	If loan, enter interest rate, if any _____ %
10.01.2016	John Livingston [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-Employed Travel Writer [Part-Time]	242.45	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 _____ %
		<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 (e.g., business entity)
- PTY - Political Party
- SCC - Small Contributor Committee