

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Taxpayers and Residents for Preserving the Quality of Life in Newport Beach, supporting Duffield, Peotter and Muldoon for City Council 2018			Date of This Filing <u>10/17/2018</u>	Date Stamp <div style="border: 1px solid red; padding: 5px; text-align: center; color: red;"> E-Filed 10/17/2018 14:38:29 Filing ID: 174308262 </div>	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (949) 474-1965	I.D. NUMBER (if applicable) 1397105	Report No. <u>253103-07</u> <input type="checkbox"/> Amendment to Report No. _____ (explain below)			
STREET ADDRESS _____			No. of Pages <u>2</u>		
CITY Irvine	STATE CA	ZIP CODE 92614			

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Scott Peotter				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED _____			
OFFICE SOUGHT OR HELD City Council Member: City of Newport Beach District 6	DISTRICT NO. 6	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
10/16/2018	LIT, CNS, POS Cumulative to date total \$15526.44	12,583.54

Reason for Amendment: _____

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I.D. NUMBER (If applicable)

1397105

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
10/16/2018	John R. Saunders Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Owner Saunders Property Company	5,000.00	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 _____%
		<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
- PTY – Political Party
- SCC – Small Contributor Committee