

Late Independent Expenditure Report

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

LATE INDEPENDENT EXPENDITURE REPORT

NAME OF FILER California Homeowners Association			Date of This Filing _____ 10/18/2020 _____		Date Stamp Page 1 of 3		CALIFORNIA FORM 496 For Official Use Only	
AREA CODE/PHONE NUMBER () - _____		I.D. NUMBER (if applicable) 1302564	Report No. _____ 887 _____					
STREET ADDRESS _____			<input type="checkbox"/> Amendment to Report No. _____ (explain below)					
CITY Hilmar		STATE CA	ZIP CODE 95324		No. of Pages _____ 3 _____			

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Mark McLoughlin				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED _____					
OFFICE SOUGHT OR HELD/DISTRICT NO. City Council Member District 03		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
10/17/2020	Printing, Mailing and Postage	\$7,518.00

Reason for Amendment:

Late Independent Expenditure Report

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CALIFORNIA
FORM **496**

NAME OF FILER

I.D. NUMBER (If applicable)

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
		<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 _____%
		<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 (June/01)
 FPPC Toll-Free Helpline: 866/ASK-FPPC
 866/275-3772

Memo Reference: TEXT-1499
Cumulative to Date Total is 14518.00
