

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER CALIFORNIA APARTMENT ASSOCIATION HOUSING SOLUTIONS COMMITTEE			Date of This Filing <u>10/21/2020</u> Report No. <u>20102105</u> ☐ Amendment to Report No. _____ (explain below) No. of Pages <u>1</u>	Date Stamp E-Filed 10/21/2020 11:41:05 Filing ID: 193718089	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (916) 473-4298		I.D. NUMBER (if applicable) 1405775			
STREET ADDRESS					
CITY SACRAMENTO	STATE CA	ZIP CODE 95814			

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED GORAN ERIKSSON				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member: CULVER CITY	DISTRICT NO.	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
10/21/2020	MASS MAIL Cumulative to date total \$8413.69	845.50

Reason for Amendment: _____
