496 Independent Expenditure Report

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

RECEIVED

496 INDEPENDENT EXPENDITURE REPORT
CALIFORNIA FORM 496

NAME OF FILER: Torrance Firefighters PAC	Date of This Filing: 05/16/2014	Date Stamp: 2014 MAY 19 AM 8: 05 CITY OF TORRANCE CITY CLERK'S OFFICE	For Official Use Only
AREA CODE/PHONE NUMBER: (310) 766-0350 — I.D. NUMBER (if applicable): 890376	Report No. 050714-06		
STREET ADDRESS: 1701 Crenshaw Blvd.	☐ Amendment to Report No. _____ (explain below)		
CITY: Torrance — STATE: CA — ZIP CODE: 90501	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			
OFFICE SOUGHT OR HELD	DISTRICT NO.	SUPPORT	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE
Kurt Weideman for City Council 2014							
Torrance City Council		☑	☐			☐	☐

2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
05/07/2014	printing fees re: Kurt Weideman for City Council 2014 (Cum: $1571.28)	$927.05
05/07/2014	postage fees re: Kurt Weideman for City Council 2014 (estimate postage Cum: $1571.28)	$644.23

Reason for Amendment: _____

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COMMITTEE NAME
Torrance Firefighters PAC

I.D. NUMBER (if applicable)
890376

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

*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