

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

RECEIVED BY
LOS ANGELES COUNTY
496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Families & Communities Supporting Jackie Lacey for District Attorney 2020, Sponsored by Peace Officers Research Association of California		Date of This Filing <u>02/14/2020</u>	Date Stamp 2020 FEB 14 PM 2: PROPOSITION B UNIT	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (916) 928-3777	I.D. NUMBER (if applicable) 1423324	Report No. <u>31436</u>		
STREET ADDRESS _____		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Sacramento	STATE CA	ZIP CODE 95834	No. of Pages <u>2</u>	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Jackie Lacey				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD District Attorney: Los Angeles County	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
02/13/2020	Radio Ads Cumulative to date total \$66481.08	4,500.00
02/13/2020	Radio Ad Production (Estimate) Cumulative to date total \$66481.08	1,000.00
02/13/2020	Radio Ads Cumulative to date total \$66481.08	30,000.00

Reason for Amendment: _____

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 LOS ANGELES COUNTY
 2020 FEB 14 PM 2:49
 CALIFORNIA FORM 496
 I.D. NUMBER (if applicable)
 1423324
 PROPOSITION B UNIT

NAME OF FILER
 Families & Communities Supporting Jackie Lacey for District Attorney 2020, Sponsored by Peace Officers Research Association of California

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
02/11/2020	San Jose Police Officers' Association Political Action Committee San Jose, CA 95112 Committee ID# 951339	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10,000.00	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 _____%
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		<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